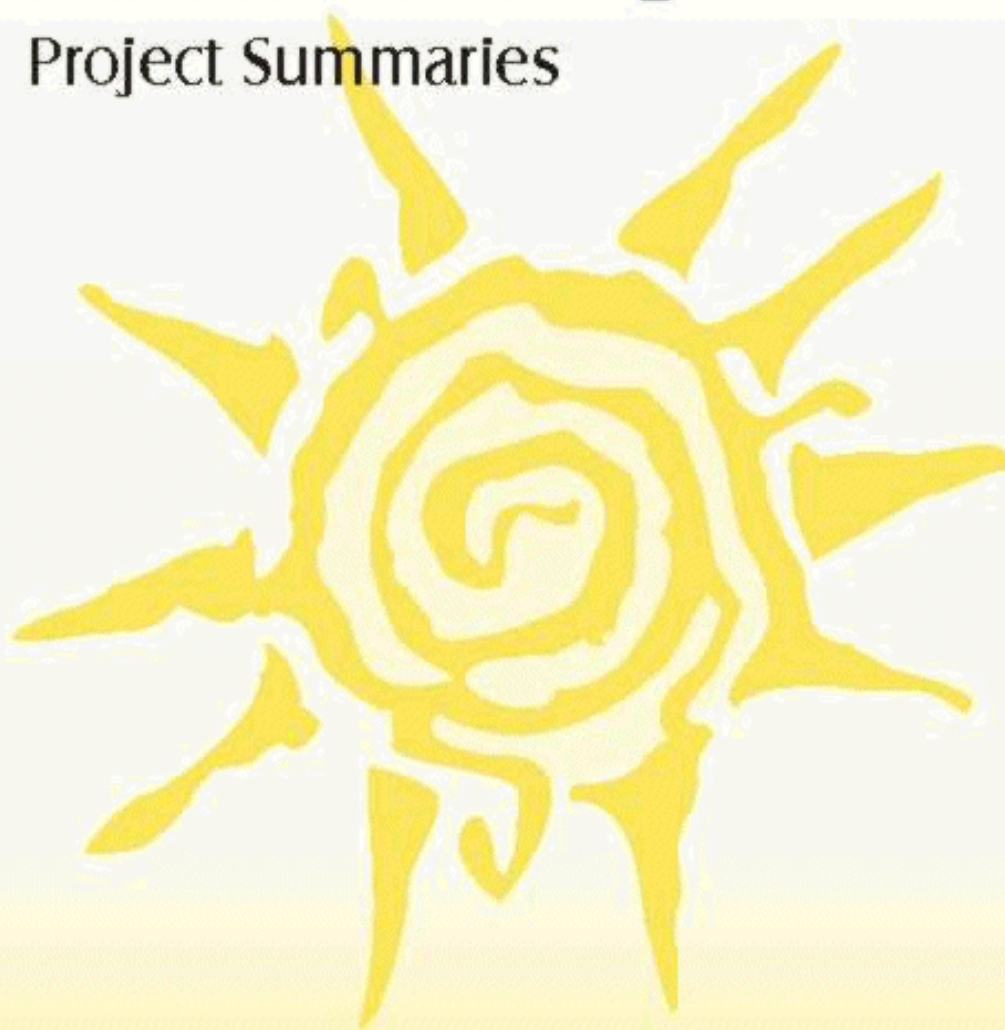


The Adolescent Family Life Demonstration Program

Project Summaries



Department of Health and Human Services
Office of Public Health and Science
Office of Population Affairs
Office of Adolescent Pregnancy Programs
4350 East-West Highway, Suite 200
Bethesda, MD 20814

1998

The Adolescent Family Life Demonstration Program

Project Summaries 1998 Update

The Office of Adolescent Pregnancy Programs
Office of Population Affairs
4350 East-West Highway, Suite 200
Bethesda, MD 20814
(301) 594-4004

Staff Listing

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The Title XX Adolescent Family Life Demonstration Program



The Adolescent Family Life (AFL) program, administered by the Office of Adolescent Pregnancy Programs (OAPP) was enacted in 1981 as Title XX of the Public Health Service Act. The FY 1998 budget provided funding which was allocated for four areas: (1) care demonstration projects, (2) prevention and abstinence demonstration projects, (3) joint prevention and care demonstration projects, and (4) research projects. OAPP is currently supporting 83 AFL demonstration project in 37 States and the District of Columbia.

Care Demonstration projects serve **pregnant adolescents, adolescent parents, their infants, partners and families.**

- AFL care projects are required to provide **health, education, and social services**, either directly or by referral, and to evaluate new approaches for implementation of these services.
- Most projects are either **hospital or agency based** and many provide **home visiting services**.
- A major focus of AFL care projects is a case management approach where each adolescent works one-on-one with a case manager throughout the pregnancy and early parenting period to address her needs, as well as those of her infant, male partner and family.
- Care projects also have strong male components.

Prevention demonstration projects serve **pre-adolescent and adolescents and their families.**

- The major focus of AFL prevention demonstration projects is, by statute, to develop and test abstinence education programs designed to **delay the onset of sexual activity** and thus reduce the incidence of adolescent pregnancy and STD transmission.
- Projects are either **school or community based** and generally provide basic sexuality education, as well as training in life skills, social skills and negotiation skills in various combinations.

All care and prevention projects funded through the AFL program include and **independent evaluation** to be conducted by an evaluator associated with a college or university in each grantee's home State.

The AFL program also supports research projects in an effort to improve understanding of the issues surrounding adolescent sexuality, pregnancy and parenting. Projects have examined factors that influence adolescent contraceptive, fertility, and sexual behaviors; the nature and effectiveness of care services for pregnant and parenting adolescents; and why adoption is a little-used alternative among pregnant adolescents.

To this end, AFL demonstration projects have developed programs that address education, career planning, job training, safe housing, decision-making and social skills, as well as the medical and health education services traditionally associated with pregnancy prevention and pregnancy management. In the past year, the AFL program has conducted training for project staff on child sex abuse issues.

AFL GRANTEES - STATE INDEX

ALABAMA

APH 000365 Page 29
Alabama Dept. of Public Health
201 Monroe Street
Montgomery, AL 36130-3017

ARIZONA

APH 000361 Page 21
The University of Arizona
P.O. Box 210033
Tucson, AZ 85721-0033

APH 100382 Page 155
Pima Youth Partnership
Southern Pima County Partnership to Reduce Teen Pregnancy
347 East Fourth Street
Tucson, AZ 85705

ARKANSAS

APH 000364 Page 27
Board of Trustees, Univ. of Arkansas
Health Education Projects Office
120 Ozark Hall
Fayetteville, AR 72701

CALIFORNIA

APH 000182 Page 15
San Mateo County Health
Services Agency
225 W. 37th Avenue
San Mateo, CA 94403

APH 000397	Page 53
TeenLink - Community (TLC) Project	
YMCA of San Diego County	
Youth and Family Services Department	
4776 El Cajon Blvd., Suite 206	
San Diego, CA 92115	
APH 000399	Page 57
Southern California Youth and Family Center	
101 North La Brea Avenue, Suite 100	
Inglewood, CA 90301	
APH 000405	Page 69
City College of San Francisco, Southeast Campus	
City College Adolescent Pregnancy Prevention Program	
1400 Evans Avenue, Room 225	
San Francisco, CA 94124	
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Northridge Hospital Medical Center	
18300 Roscoe Blvd.	
Northridge, CA 91328	
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Alum Rock Counseling Center, Inc.	
1245 E. Santa Clara Street	
San Jose, CA 95116	
APH 000415	Page 89
ETR Associates	
P.O. Box 1830	
San Cruz, CA 95061-1830	
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Drew Child Development Corporation, Inc.	
Adolescent Information and Education	
1770 East 118th Street	
Los Angeles, CA 90059-2518	
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Vista Community Clinic	
981 Vale Terrace	
Vista, CA 92084	

APH 100375	Page 141
YWCA of Watsonville , CA	
340 East Beach Street	
Watsonville, CA 95076	

COLORADO

APH 000406	Page 71
Denver Health and Hospital Authority	
777 Bannock Street, MC 1914	
Denver, CO 80204-4507	

CONNECTICUT

APH 100384	Page 159
Fairhaven Community Health Clinic, Inc.	
324 Grand Avenue	
New Haven, CT 06513	

DISTRICT OF COLUMBIA

APH 100374	Page 139
Latin American Youth Center	
1419 Columbia Road, N.W.	
Washington, D.C. 20009	

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Delta Research and Educational Foundation	
1707 New Hampshire Avenue, NW	
Washington, D.C. 20009	

FLORIDA

APH 000403	Page 65
Boys & Girls Club of Sarasota County, Inc.	
3100 Fruitville Road	
Sarasota, FL 34237	

APH 000404 Page 67
Gold Coast Community Services
309 N. Seacrest Blvd.
Boynton Beach, FL 33435

APH 000416 Page 91
University of Miami - School of Medicine
Department of Epidemiology & Public Health
P.O. Box 016069 (R-669)
1801 NW 9th Avenue
Miami, FL 33101

APH 100368 Page 127
ASPIRA of Florida, Inc.
14112 Southwest 288th Street
Leisure City, FL 33033

GEORGIA

APH 000362 Page 23
Emory University
Office of Sponsored Programs
1784 N. Decatur Rd., Suite 510
Decatur, GA 30322

APH 000400 Page 59
Morehouse School of Medicine
Health Promotion Resource Center
720 Westview Drive, S.W.
Atlanta, GA 30310-1495

IDAHO

APH 000427 Page 113
Valley Boys and Girls Club, Inc.
1021 Burrell
Lewiston, ID 83501

ILLINOIS

APH 000424 Page 107

Chicago Commons Association
Mary McDowell Settlement House
1335 W. 51st Street
Chicago, IL 60622

APH 000425 Page 109

Lake County Health Department
3010 Grand Avenue
Waukegan, IL 60085

INDIANA

APH 000422 Page 103

Health & Hospital Corp. of Marion County
3838 North Rural Street
Indianapolis, IN 46205

IOWA

APH 000421 Page 101

The University of Iowa
College of Nursing
Iowa City, Iowa 52242

KANSAS

APH 100380 Page 151

Catholic Community Services
Education and Training
2220 Central
Kansas City, KS 66102

KENTUCKY

APH 100377 Page 145

Pike County Board of Education
P.O. Box 3097
Pikeville, KY 41502

LOUISIANA

- APH 000393** Page 45
YWCA of Greater Baton Rouge
250 South Foster Drive
Baton Rouge, LA 70806
- APH 000432** Page 123
Tulane University School of Public Health
and Tropical Medicine Center
Department of Community Health Sciences/SL 29
1501 Canal Street
New Orleans, LA 70112
- APH 100369** Page 129
Tulane University
Psychology Department
6823 Saint Charles Avenue
New Orleans, LA 70118

MAINE

- APH 000426** Page 111
People's Regional Opportunity Program
510 Cumberland Avenue
Portland, ME 04101

MARYLAND

- APH 000179** Page 7
University of Maryland at Baltimore
511 West Lombard St., Suite 500
Baltimore, MD 21201
- APH 000418** Page 95
University of Maryland at Baltimore
Department of Family Medicine
29 S. Paca Street
Baltimore, MD 21201

MASSACHUSETTS

APH 000178	Page 5
Children's Hospital 300 Longwood Avenue Boston, MA 02115	

MICHIGAN

APH 000526	Page 35
Lula Belle Stewart Center, Inc. 1534 Webb Avenue Detroit, MI 48206	

APH 000409	Page 77
Michigan Neighborhood Partnership Youth and Family Development 3011 W. Grand Blvd., Suite 405 Detroit, MI 48202	

APH 100378	Page 147
North Michigan Planned Parenthood Association, Inc. 1135 East Eighth Street Traverse City, MI 49686	

MINNESOTA

APH 100373	Page 137
Lao Family Community of Minnesota, Inc. Youth and Families Program 320 West University Avenue St. Paul, MN 55103	

MISSISSIPPI

APH 000420	Page 99
Starkville School District Family-Centered Programs 401 Greensboro Street Starkville, MS 39759	
APH 100386	Page 163

Clay County Boys and Girls Club
P.O. Box 894
West Point, MS 39773

MISSOURI

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Truman Medical Center
Teen Moms Project
2301 Holmes Street
Kansas City, MO 64108

APH 100379 Page 149

St. Francis Hospital and Health Services
Life's Walk, Inc.
2016 South Main
Maryville, MO 64468

MONTANA

APH 000401 Page 61

Boys & Girls Club of the Northern Cheyenne Nation
P.O. Box 309
Lame Deer, MT 59043

APH 100372 Page 135

School District 87J
Rocky Boy Public Schools
RR 1 Box 620
Box Elder, MT 59521

NEVADA

APH 000402 Page 63

Nevada Public Health Foundation
One East First Street, Suite 806
Reno, Nevada 89501

NEW JERSEY

APH 000389	Page 37
Montclair State University	
Dept. of Health Professions/PERLS	
College Hall, Room 301	
Upper Montclair, NJ 07043	

NEW YORK

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Builders for Family & Youth	
191 Joralemon Street, 8th Floor	
Brooklyn, NY 11201	

APH 000363	Page 25
Inwood House	
320 East 82nd Street	
New York, NY 10028	

APH 000391	Page 41
Prevention Partners, Inc.	
One Mustard Street, Suite 400	
Rochester, New York 14609	

APH 000392	Page 43
Syracuse Area Catholic Charities	
1654 W. Onondaga Street	
Syracuse, NY 13204	

APH 000428	Page 115
Buffalo Federation of Neighborhood Centers	
Buffalo Adolescent Pregnancy Prevention Services	
1225 Main Street	
Buffalo, NY 14209	

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Community School District 18	
Comprehensive School Health Education Program	
755 East 100 Street	
Brooklyn, NY 11236	

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Mt. Sinai Hospital
Adolescent Health Center
320 East 94th Street
New York, NY 10128

APH 100388	Page 167
Our Lady of Lourdes Memorial Hospital	
Youth Services Department	
169 Riverside Drive	
Binghamton, NY 13905	

NORTH CAROLINA

APH 000412	Page 83
Wake County Human Services	
10 Sunnybrook Road	
P.O. Box 14049	
Raleigh, NC 27620	

OHIO

APH 000183	Page 17
Catholic Social Services of the Miami Valley	
922 W. Riverview Avenue	
Dayton, OH 45407	
APH 000390	Page 39
Services United for Mothers and Adolescents (SUMA), Inc.	
821 Ezzard Charles Drive	
Cincinnati, OH 45203	

OREGON

APH 000417	Page 93
Northwest Family Services	
4805 NE Glisan Street	
Portland, OR 97213	

PENNSYLVANIA

APH 000184	Page 19
North Penn Comprehensive Health Services 520 Ruah Street, P.O. Box 8 Blossburg, PA 16912-0008	
APH 000366	Page 31
Crozer-Chester Medical Center The Wellness Center 1701 Upland Avenue Chester, PA 19013-3995	
APH 000525	Page 33
The Mercy Hospital of Pittsburgh 1400 Locust Street Pittsburgh, PA 15219	
APH 000395	Page 49
Rape and Victim Assistance Center of Schuylkill County 368 South Centre Street Pottsville, PA 17901	
APH 000396	Page 51
Crime Prevention Association 230 South Broad Street Philadelphia, PA 19102	
APH 100387	Page 165
Family Life Educational Foundation Chastity Educators Network P.O. Box 27094 Philadelphia, PA 19118	

SOUTH CAROLINA

APH 000414	Page 87
South Carolina Department of Health and Environmental Control Pee Dee Health District 145 E. Cheves Street Florence, SC 29506	

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University of South Carolina
College of Social Work
Columbia, SC 29208

APH 100367	Page 125
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South Carolina Department of Health and Environmental Control
Waccamaw Health District
2830 Oak Street
Conway, SC 29526

SOUTH DAKOTA

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Rural America Initiatives, Inc.
919 Main Street, Suite 201
Rapid City, SD 57701

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County Board of Education
Meade School District 46-1
1230 Douglas Street
Sturgis, SD 57785

TENNESSEE

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Polk County Department of Education
Drawer A
Benton, TN 37307

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Covenant Health Agency
Teenage Pregnancy Prevention Program
12655 E. Lee Highway
Lenore City, TN 37771

TEXAS

- APH 000180** Page 11
Houston Independent School District
3830 Richmond Avenue
Houston, TX 77027
- APH 000419** Page 97
Teenage Parent Council of Austin, Inc.
8000 Centre Park Drive, Suite 370
Austin, TX 78754

VIRGINIA

- APH 100381** Page 153
Waynesboro Teen Pregnancy Coalition
City of Waynesboro - Office on Youth
P.O. Box 894
Waynesboro, VA 22980

WISCONSIN

- APH 000394** Page 47
Rosalie Manor, Inc.
4803 West Burleigh Street
Milwaukee, WI 53210
- APH 000398** Page 55
First American Prevention Center
P.O. Box 529
Bayfield, WI 54814
- APH 000408** Page 75
Boys and Girls Club of Superior, Inc.
710 Catlin Avenue
Superior, WI 54880
- APH 100371** Page 133
Children's Outing Association
Predom Program
909 East North Avenue
Milwaukee, WI 53212

WYOMING

APH 100376 Page 143

NOWCAP

P.O. Box 158

Worland, WY 82401

AFL Demonstration Project Summaries

PROJECT SUMMARY - APH 000176

Agency: Truman Medical Center
2301 Holmes Street
Kansas City, MO 64108

Director: Julie Strickland, M.D.

Phone Number: (816) 556-3529

Evaluator: Christine M. Rinck, Ph.D.

Type of Project: Care Demonstration Project

Model: Home Visitation with Case Management

Project Start Date: October 1, 1995

Program Description:

The Adolescent Family Life (AFL) Project is sponsored by Truman Medical Center West. This agency is a non-profit corporation that functions as the public hospital system for Kansas City, Missouri and Jackson County, serving patients without regard for ability to pay.

Teen Mentors of Mothers (Teen MOMs) is a longitudinal, comprehensive mentoring program designed to assist pregnant and subsequently parenting teens in managing the inherent difficulties of early childbearing. Through the use of pairs and trained adult mentors, the primary intervention is the provision of individual support and assistance in accessing community resources for up to 3 years. By cooperation with other community agencies, additional family centered activities will be developed or enhanced. This includes a support group for grandparents, parenting groups for teen parents, special referral to a comprehensive male mentoring program, a self esteem program targeting both male and female siblings of teen mothers and a support group for high risk teen girls testing negative for pregnancy. Distribution of materials aimed at responsible sexual behavior will be expanded.

Focus of the Demonstration:

Teen MOMs represents a collaborative community effort aimed at enhanced integration and improved utilization of community resources in an effort to improve the quality of life for teen parents and their families as well as delay subsequent childbearing during the teen years.

The Teen MOMs project has the following program objectives:

- 1) provide culturally appropriate mentors to assist and support pregnant and parenting adolescent females, their significant others and their children to improve their quality of life through: improved knowledge and appropriate use of needed community and health related resources; enhanced self esteem and life direction including completion of educational and vocational goals and decrease depression; improved parenting skills; enhanced social networks and improved family support systems; and delay of future childbearing to beyond the teen years;
- 2) enhance the integration and coordination of services to parenting teens, their children, and significant others by: identification of gaps and barriers to service within the community; provision of case management of high risk patients; increased inter-agency and inter-institutional continuity; increasing utilization of health related services to maximize health and developmental gains by children of teen parents; and improvement of the quality of psychosocial functioning of children and their teen parent by assistance and support and improvement of parenting skills;
- 3) assist families of pregnant and parenting adolescents to deal with the family challenges created by teen pregnancy and to impact of the familial cycle of teen pregnancy through: enhanced parenting skills of grandparents; delaying pregnancy and enhancing knowledge of female siblings; and encouraging responsible sexual behavior and life decisions for male siblings; and,
- 4) provide outreach activities to high risk adolescents through providing support and information on responsible sexual behavior increasing factual knowledge of healthy sexual behavior and its consequences.

Expected Findings/Results:

Mentored teens are compared with a randomly selected group of teens receiving traditional pre and post pregnancy care on a series of repeated battery of tests. Those participating in other aspects of the program will be evaluated with pre and post testing as well as tracked for changes in participation and performance levels. Variables predicted to show improvement because of mentoring include: repeat pregnancy rate, school/vocational training, outcomes of the infants and enhancement of parenting skills.

PROJECT SUMMARY - APH 000177

Agency: Builders for Family and Youth (BFFY)
191 Joralemon Street, 8th Floor
Brooklyn, NY 11221

Project Director: Stacey Lawrence

Phone Number: (718) 722-6023

Evaluator: Brian J. Balicki, M.H.S.

Type of Project: Care Prevention Demonstration Project

Model: Community-based

Project Start Date: October 1, 1995

Program Description:

The Builders for Family and Youth, Inc project provides home based care and preventive services to the Bushwick community. This AFL Demonstration Project is designed specifically to attack the problem of providing access of quality, caring programs to the low-income, minority, pregnant and parenting teenagers and their families. With clients ranging in age from 12 -20, services include personalized health care for teens and their babies, parenting and nutrition education, life skills and referrals to outside agencies for continuing education and job training/placement. The Care Partner Innovative Educators (CPIEs) include a case worker, nutritionist, registered nurse and 2 parent interns. Members of the CPIE team are paired off and deliver their individualized, specialized services in the clients' home.

Focus of the Demonstration:

This project has six (6) primary goals: (1) build family and community support for isolated minority, low-income pregnant and parenting teens and their families; (2) improve access, continuity and comprehensiveness of services to target families; (3) reduce fragmentation of traditional agency based approach to care delivery; (4) build self-reliance among target families; (5) increase parenting skills and knowledge of teens and their parents; and (6) promote adoption as a positive option for adolescents through education and training.

The project focuses on pregnant and parenting adolescents and their children for the purpose of providing quality care and preventive services while empowering the clients to become positive and productive residents of their community through continuing education and self esteem.

Expected Findings/Results:

The evaluation for Project OASIS is delivered in two separate aspects. First, two comparison groups will be used. The first focus group will consist of borough-wide data regarding the number of pregnant teens and their pregnancy outcomes. The second focus group will consist of pregnant and parenting teens from the Coney Island section who still receive traditional agency based referrals as opposed to our home-based assessment, educational and referral services. The second evaluation relates primarily to the use of "Timeladder Exercises" which provides an analysis of the time spent on client interaction and administrative aspects.

PROJECT SUMMARY - APH 000178

Agency: Children's Hospital
300 Longwood Avenue
Boston, MA 02115

Project Director: Joanne Cox, M.D.

Phone Number: (617) 355-8921

Evaluator: Dawn Obeidallah, Ph.D.

Type of Project: Care Demonstration Project

Model: Hospital and Community-Based

Project Start Date: October 1, 1995

Program Description:

The Adolescent Family Life Project (The Parenting Project) is a community and hospital-based project designed to add parenting services and community linkages for adolescent mothers and fathers to adolescent prenatal services and a comprehensive teen tot health clinic. Participants live in urban Boston, Massachusetts. The Parenting Project represents a collaborative effort between Children's Hospital Young Parents Program, the Brigham and Women's Adolescent Reproductive Health Service and Project Life, a community-based multi-service organization. It provides linkages between prenatal care, postnatal adolescent and baby care and community home based services. Adolescents are identified and enrolled during prenatal care.

Focus of the Demonstration:

The Parenting Project is designed to accomplish the following goals: (1) to ensure that all adolescents receive early and appropriate prenatal care and postpartum care services; all infants will receive adequate preventive care including immunizations, screening and physical exams; (2) to increase parenting skills with improved bonding, role definition, knowledge of growth and development and father responsibility; (3) to provide psycho-social support to the mother and her family as well as her baby's father; (4) to involve each adolescent in life planning education.

Expected Findings/Results:

The program is evaluated by both a process evaluation and outcome evaluation. Adolescent mothers and fathers will be enrolled and will comply with the program including participation in routine health care and individual counseling sessions. They will also participate in one twelve-session group. Breast feeding will be increased as will the number of fathers participating in the program. Adolescents will be enrolled in school. They will all receive referral for family planning services. Repeat pregnancy will be decreased.

The outcome evaluation will demonstrate increased knowledge of maternal and infant nutrition and favorable attitudes towards breast-feeding. Fathers' attendance during prenatal visits and at labor and delivery will be increased. Post-partum, adolescent parents will demonstrate appropriate developmental expectations of their child, empathy toward their child's needs, understanding of positive discipline and of parent-child roles. Caretaking ability, mother's role and her acceptance of the child will also be increased.

PROJECT SUMMARY - APH 000179

Agency: University of Maryland at Baltimore
Department of Family Medicine
29 S. Paca Street, Lower Level
Baltimore, MD 21201

Project Director: Beth Barnet, M.D.

Phone Number: (410) 328-2626

Evaluator: Anne Duggan, Sc.D.

Type of Project: Care Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1995

Program Description:

This Adolescent Family Life Demonstration Project is called Project BRIDGES: **B**uilding **R**esources toward **I**ndependence, **D**ecision-making, **G**raduation, and **E**steem of **S**elf. Project BRIDGES is a multi-component school- and community-based program designed to enhance and integrate comprehensive services for inner-city, childbearing adolescents and their children. Through linked and integrated school- and home-based interventions, this program targets multiple domains of functioning to improve health outcomes among pregnant and parenting adolescents and their children.

Project BRIDGES is a collaborative effort of: 1) University of Maryland at Baltimore (UMB) Department of Family Medicine, 2) The Paquin School, a public Baltimore City junior/senior high school for childbearing adolescents, 3) Parent's Anonymous of Maryland, Inc., a non-profit community agency with a home visiting and mentoring program designed to prevent child abuse and neglect, 4) UMB-Department of Psychiatry, Division of Alcohol and Drug Use, 5) a nutritionist, 6) Arena Players, the oldest operating African-American theater company in the nation, and 7) MotherRhythms, Inc., a program of prenatal and postpartum dance movement, relaxation and exercise.

Focus of the Demonstration:

Project BRIDGES is designed to accomplish the following goals: 1) promote life skills that lead to improved choices among childbearing adolescents especially in the areas of responsible sexual behaviors, prevention of alcohol and illicit drug use, educational attainment, and future life goals; 2) increase knowledge of child development and enhance parenting skills and maternal care giving among childbearing adolescents, and assist the family support network; 3) improve self-esteem through participation in group efforts that include nutrition, exercise, dance movement activities, and a Drama Outreach group; and 4) provide support to pregnant and parenting teens through individual counseling and mental health focus groups dealing with substance abuse, violence, physical and sexual victimization, and grief and loss issues.

These goals are achieved through a multi-component program that includes: 1) the 12 session school-based UPPASA curriculum that teaches problem-solving and decision-making skills around issues related to HIV/STD and substance abuse prevention, 2) a community-based longitudinal, one-on-one home visiting program for pregnant and parenting teens, 3) a school-based nutrition, fitness, and dance movement program, and 4) a school-and-community based peer-led drama outreach program, and 5) enhanced school-based mental health services.

Expected Findings/Results:

Pre-test and post-test data are collected at the start and finish of the 12-session curriculum. The Home Visiting/Mentoring component of BRIDGES is designed as a randomized controlled trial where half of eligible pregnant and parenting teens have been randomized to receive home visiting/mentoring services and half have been randomized to receive their usual care. Follow-up assessments of clients and their children who have received home visiting services are also included for evaluation purposes.

PROJECT SUMMARY - APH 000179

Agency: University of Maryland at Baltimore
Department of Pediatrics
Division of Adolescent Medicine
120 Penn Street, 1st Floor
Baltimore, MD 21201

Project Director: Jodi Shaefer, Ph.D.

Phone Number: (410) 328-6495

Evaluator: Peggy Parks, Ph.D.

Type of Project: Care Demonstration Project

Model: Hospital-Based Interdisciplinary Medical Model

Project Start Date: October 1, 1995

Program Description:

Project TeenTot DADS is a collaborative effort of the Division of Adolescent Medicine, the Western Center for Maternal and Infant Care, and the Pediatric Ambulatory Center of the University of Maryland. The collaboration was formed to address the needs of inner city youth by expanding an existing clinic for first time teen mothers and their infants (The TeenTot Clinic) to include an aggressive outreach program which will involve the fathers in the care of their children. The TeenTot Clinic already has an aggressive outreach program targeted to the grandmothers of the babies, the TeenTot MOMS (Mothers of Mothers) Project.

Focus of the Demonstration:

The TeenTot DADS project is designed to accomplish the following two objectives: (1) engage the fathers of babies born to teenage mothers in a program that will be a source of strength for their parenting roles, and (2) involve fathers in activities that strengthen their relationships with their babies, the mothers of the babies, and other men in the community.

This project uses The Healthy Start Fathers Journal 1525 in the group sessions with the fathers. This curriculum was chosen because the "adult" version of the curriculum was developed for me in urban Baltimore through the Baltimore City Healthy Start Department and this curriculum was respected by the African-American male community in the city.

Expected Findings/Results:

This project utilizes both a Process Evaluation and an Outcomes Evaluation. The Process Evaluation is designed to evaluate which components of the project are helpful to the young men who join the program, while the Outcome Evaluation is designed to assess outcome measures both qualitatively and quantitatively. Qualitative Evaluation is conducted with open-ended, semi-structured interviews conducted with some of the fathers and is designed to determine the following: What is the experience of being a father of a baby born to an adolescent mother? What is their perspective on their relationships with the baby, the mother, and other fathers? How did TeenTot DADS Project help them as a father? Interviews are tape recorded and transcribed. Quantitative Evaluation uses selected measures to describe specific characteristics (demographic and care-giving) of young fathers in the program.

As a result of this project, it is anticipated that fathers will be more comfortable in their roles as father and project staff will have a better understanding of the types of services that young fathers need to be successful as fathers.

PROJECT SUMMARY - APH 000180

Agency: Houston Independent School District
5827 Chimney Rock
Houston, TX 77081

Project Director: Mattye B. Glass, Ed.D.

Phone Number: (713) 349-7423

Evaluator: Maxine W. Epstein, Ph.D.

Type of Project: Care Demonstration Project

Model: School-, Community- and Home-Based Project

Project Start Date: October 1, 1995

Program Description:

Opportunities for Parenting Teens (OPT) initially funded in 1995, is a comprehensive care program that provides services to identified pregnant/parenting teens on ten secondary campuses in the Houston Independent School District. The program funds are used to further enhance and extend services provided to those students who are participating in a Texas Education Agency funded initiative. Through this initiative, Pregnancy, Education and Parenting (PEP) awards funding to school districts to assist them in the reduction of students who drop out due to issues related to pregnancy and/or parenting. OPT enables these ten campuses to focus on minimizing those factors which may cause these identified students to drop out of school. The OPT program provides a wide array of interventions which focus on promoting mental and physical health, minimizing school dropout and failure, repeated pregnancies, and promoting effective parenting skills. The program interventions include eighteen core services which are coordinated through the OPT coordinator assigned at each school site. The school nurse on each participating school campus serves as the lead case manager to ensure the coordination of service delivery.

Focus of the Demonstration:

OPT is designed to accomplish the four following goals: (1) add critical care services to supplement existing adolescent health services; (2) foster academic achievement of parenting teens with the goal of graduation from high school; (3) encourage the delay of subsequent pregnancies; and, (4) enhance

parenting skills, promote healthy life-styles, and optimum physical and mental health.

Critical to the success of the program has been the deployment of an efficient means of identifying the students for whom the services are intended, the commitment and stability of the staff, and most importantly, the support of our district's administration. Services such as mental health, tutorials and information for counseling on nutrition and adoption services are conducted on site and during the regular school day.

Students may self refer or be referred by another participant or school staff. School campuses have seen significant student progress and achievement since the fall of 1995, particularly as it relates to graduation rates of pregnant and parenting teens.

Expected Findings/Results:

The OPT program strives to improve basic academic skills of students; increase impact and efficiency of service provided in a coordinated and integrated manner, and improve school attendance among adolescent participants.

PROJECT SUMMARY - APH 000181

Agency: Rural America Initiatives
919 Main Street, Suite 201
Rapid City, SD 57701

Project Director: Bruce Long Fox

Phone Number: (605) 341-3339

Evaluator: Ann L. Wilson, Ph.D.

Type of Project: Care Demonstration Project

Model: Medical-Based with Case Management

Project Start Date: October 1, 1995

Program Description:

Project Takoja provides medical services by referral as well as educational groups in substance abuse, Fetal Alcohol Syndrome, parenting, nutrition, adoption, HIV, and STDs. Culturally relevant parenting materials are developed and used. Project Takoja provides home visiting for those teen mothers who are assessed to be at high risk of substance abuse, premature birth, or domestic abuse.

Project Takoja assumes that adequate primary health services are available, but that underlying socio-economic barriers prevent mothers from accessing the services. Case managers as mediators, educators and counselors overcome these barriers. Support, tracking and follow -up services help to improve health and family outcomes for these adolescent mothers.

Focus of the Demonstration:

Project Takoja has four main goals:

- (1) To reduce the incidence of Fetal Alcohol Syndrome (FAS)
 - To provide weekly substance abuse education groups to teenagers 12-19 who have tested positive for pregnancy.
 - To obtain abstinence contracts for 90% of referred teen mothers.
 - To use culturally appropriate breast-feeding education to promote bonding.

- (2) To increase the number of prenatal visits for 90% of the (targeted) referred mothers.
 - To provide Case Management tracking and transportation for all clients to ensure their attendance at prenatal and well child visits.
 - To provide a series of five home visits to those assessed as high risk.
- (3) To facilitate the completion of chemical dependency treatment for 50% of the male partners.
 - To provide alcohol assessments to both mother and the male partner.
 - To use the Red Road Approach to recovery using values of traditional Lakota culture.
 - To develop and emergency short-term shelter fund to support mothers in avoiding parties and fights.
- (4) To provide culturally appropriate parenting classes weekly to 80% of referred clients.
 - To provide related education in the areas of HIV, AIDS, Family Planning (referred), nutrition, and self-esteem.
 - To provide pre and post parenting competency tests to demonstrate the effectiveness of parenting classes.
 - To provide attendance incentives to encourage client and family attendance.

Expected Findings/Results:

This project expects to find a decrease in ARDD/FAS rates, overall improved health outcomes for mother and child through increased prenatal visits, and a decrease in child abuse and neglect rates by strengthening parenting skills and strengthening knowledge of appropriate discipline.

PROJECT SUMMARY - APH 000182

Agency: San Mateo County Health Services Agency
225 W. 37th Avenue
San Mateo, CA 94403

Project Director: Diane Quinn, R.N.

Phone Number: (650) 573-2344

Evaluator: Nancy Frank & Associates

Type of Project: Care Demonstration Project

Model: Community-based with Home Visits

Project Start Date: October 1, 1995

Program Description:

The San Mateo County Adolescent Family Life (SMCAFLP) Project links pregnant teens, adolescent parents, and their families with an integrated network of clinic and community-based health and support services through home-based case management. Members of an interdisciplinary team of public health nurses, community health workers, and trained volunteers make regular visits to pregnant and parenting teens and their families. Each visit is structured to meet individual needs identified through in-depth assessment and ongoing case planning. Culturally relevant, developmentally appropriate adolescent family life guidelines structure home visits to build skills for self-care and healthy infant/child development. Frequent home visits are the basis for linkages to comprehensive community services and support.

Focus of the Demonstration:

SMCAFLP's services are specifically designed to respond to San Mateo County's increasing population of Latina, Filipina, and African-American pregnant and parenting teens. Bi-lingual and bi-cultural staff and volunteers integrate culturally proficient strategies in all aspects of home-based case management.

A tiered services design assesses the risks and resources of pregnant and parenting teens medically, socially and environmentally and targets service levels to address those risks. Teens experiencing high risk factors (e.g. medical problems, family violence, age 14 or under) receive the most intensive services. They are assigned a nurse case manager who works with a community health worker and volunteers to make weekly home visits. High-risk adolescents are assigned a nurse case manager who makes twice monthly visits and receive community health worker and volunteer services as needed. Low risk adolescents with significant family support and positive future plans are assigned a community health worker manager who makes at least monthly home visits in conjunction with volunteers. Nurses visit low risk adolescents and their families as needed. The interdisciplinary team continually reassess care plans adjust levels of service to meet changing needs of teens and their families.

Expected Findings/Results:

Increases in the frequency and duration of culturally-competent case management to pregnant and parenting adolescents will influence attitudes and behaviors resulting in earlier prenatal care and ongoing utilization of health care resources.

Strong inter-agency connections also contribute to early engagement of pregnant adolescents. SMCAFLP's established referral agreements have been the basis for developing solid working relationships with a range of health, social service, and community workers that facilitate early referrals and ongoing service linkages. Additionally, adolescents and their family members participating in SMCAFLP are increasingly referring other teens who suspect or find out they are pregnant.

Core services delivered through home visits include assessment, care planning and follow up, adoption information and counseling, prenatal and well baby screening by public health nurses, nutrition information and counseling, prevention education, family life education. SMCAFLP has continued to strengthen and expand child development services. The workshop series has the following goals: 1.) To teach basic listening skills which will enhance effectiveness in both personal contact and in parent group situations; 2.) To provide training in parent group leadership skills; 3.) To examine the specific effects of societal oppression on parents and to learn to help parents set a direction toward reclaiming their parental responsibility; 4.) To present basic principles of listening, parent-to-child, which can help parents nurture their children effectively; and, 5.) To build supportive relationships between staff members, using staff support groups as a model of the listening environments that the class participants are learning to set up for parents.

PROJECT SUMMARY - APH 000183

Agency: Catholic Social Services of the Miami Valley
922 West Riverview Avenue
Dayton, OH 45407-2424

Project Director: J. Elaine Jelly, M.S.W., L.I.S.W.

Phone Number: (937) 223-7217

Evaluator: Brenda Donnelly, Ph.D.

Type of Project: Care Demonstration Project

Model: Community- and Home-Based

Project Start Date: October 1, 1995

Program Description:

Teen Parent*Link* is a collaborative, multi-agency project that provides and coordinates counseling and case management services for teens who give birth in Montgomery County, Ohio. These services are provided through a variety of partners and include approaches that are community-based and home-based.

Led by Catholic Social Services of the Miami Valley (CSSMV), this collaborative includes public and private agencies, medical providers and schools. The primary partners are: Montgomery County Children Services, Family Services Association, Lutheran Social Services, Miami Valley Hospital, Franciscan Medical Center, and Good Samaritan Hospital.

Teen Parent*Link* (TPL) provides assessment and monitoring services to young mothers and referral for further services for those who need additional support or treatment. Teens are visited at regular intervals through six months post-partum, offered intensive case management services, health and adoption information, pregnancy counseling, parenting education and family counseling.

Focus of the Demonstration:

The overall program goal is to decrease the negative consequences of adolescent child-bearing and increase positive outcomes for the targeted population (teens, their babies and their families).

The project will decrease the incidence of child abuse and neglect to infants born to adolescent mothers who are participants in the TPL Project by: conducting assessments on pregnant and newly parenting teens; providing monitoring services to targeted teens; and providing intensive counseling and case management services. The TPL project will also increase the utilization of appropriate services by eligible teens in Montgomery County by: identifying and initiating contact with eligible pregnant and parenting teens; conducting an assessment and initiating development of service plan; and, making referrals and facilitating linkage to resources. The project will reduce risk factors identified by assessment process, and increase protective and environmental support factors for the teen, her child(ren), and, whenever possible, her family by providing appropriate treatment services (pregnancy counseling, medical social service, and/or family counseling).

Strengthening the targeted teens' parenting skills and knowledge, self-sufficiency skills, and social support system through individual and group sessions will also be a focus of the project. The project will also further develop and promote the system of comprehensive, coordinated services for pregnant and parenting teens, their babies, and their families in Montgomery County by: facilitating TPL and Home-Based Services Task Force meetings.

Expected Findings/Results:

The evaluation design for the Teen Parent*Link* project involves a comparison of the four main treatment options available through this demonstration grant: assessment and monitoring alone; assessment and monitoring with intensive case management and family counseling; pregnancy counseling; or medical social services. Behavioral and attitudinal outcomes are all explored. Data are collected through self-report surveys, staff observations and interview, as well as from governmental records and files of the child protection agency.

It is expected that project participants receiving treatment beyond the assessment and monitoring component of the project will be more satisfied with their parenting decision, better connected with the resources needed to support that decision, and somewhat less likely to maltreat their children. It is expected that the project will have altered patterns of serious abuse and neglect by the young mothers in the county by improving the preventative services available to the young families in the community and by identifying those most at risk of harmful behaviors and connecting them with the support services they need prior to the development of serious patterns of problematic behaviors.

PROJECT SUMMARY - APH 000184

Agency: North Penn Comprehensive Health Services
520 Ruah Street, P.O. Box 8
Blossburg, PA 16912-0008

Project Director: Elaine M. Hickey

Phone Number: (717) 638-3367

Evaluator: Christine Pistella, Ph.D.

Type of Project: Care Demonstration Project

Model: Community- and Home-Based

Project Start Date: October 1, 1995

Program Description:

North Penn Home Health Agency provides home health care services to citizens of all ages. The type and frequency of service is determined by each patient's family physician working in cooperation with Home Health Agency professionals, the patient and his/her family members. Services available in the patients' home include: professional nursing care, physical therapy, speech therapy, occupational therapy, Home Health Aides, medical social services and supportive services. This AFL project provides a registered nurse who serve as a mentor/educator/case coordinator to ensure that families receive in-home instruction on prenatal care, postnatal care, postpartum care, nutrition, and parenting skills. Referrals for other supportive and ancillary services, (i.e., WIC, immunizations, special health needs an continuing educational skills), are also be facilitated by the nurse coordinator. This service is offered to all referred adolescent parents (age 19 and younger), their infants and extended families that reside in Tioga County, PA and adjacent areas served by Tioga County physicians.

Focus of the Demonstration:

After delivery, the Nurturing Program helps the girls become confident nurturing parents. Home Nursing visits focus on identifying health problems in the child or parent. Also, educational issues are discussed focusing on STDs, nutrition, growth and development, discipline, and parenting.

Teen parents are drawn from referrals from networking agencies. For each teen, assessments are

made concerning eligibility, parental consent where indicated, and clinical and psycho-social needs. From the information gathered, an appropriate plan of care is developed and is comprised of the appropriate core and supplemental services needed by and available to each client. In conjunction with local parenting skill classes, the Breaking the Cycle curriculum is used. This AFL Demonstration Project provides evening Nurturing Parent class which also serve as a support group.

Each participant completes Early Periodic Screening Diagnostic and Treatment (EPSDT) exams and immunizations during the first two years of life of all infants born to enrollees in the project. In addition, the home health nurse ensures that parents arrange for exams and immunizations as necessary. Provision of family planning counseling and education and referral reduces the number of repeat pregnancies by the Project's enrollees.

Expected Findings/Results:

This project is currently using a TPPCIS (Teen Pregnancy Programs Computer Information Systems) evaluation system which has been revised by the program evaluator. The TPPCIS evaluation includes educational, economical and health information and covers all our objectives excluding the parenting skills. In addition, this project uses the Nurturing Program Quiz and Adult-Adolescent Parenting Inventory (AAPI) to unofficially evaluate the Nurturing Program part of this project. However, it is noted that there are participants who do not wish to follow through with the Nurturing Program because of the high number of home visits involved in that particular project component.

This program is expected to increase the number of clients receiving the core and supplemental services they need with positive health benefits for participants; decrease the incidence of reporting child abuse and neglect in the population; increase the number of healthy infants and children by decreasing the negative consequences associated with neglecting medical exams and immunizations; increase the number of clients who have become more independent and show social responsibility; fewer repeat pregnancies; and an increase in the number of clients who continue and complete educational programs.

PROJECT SUMMARY - APH 000361

Agency: The University of Arizona
P.O. Box 210033
Tucson, AZ 85721-0033

Project Director: Sherry C. Betts, Ph.D.

Phone Number: (520) 621-3399

Evaluator: Wendy Gamble, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1995

Program Description:

The Arizona prevention program is implemented using the Postponing Sexual Involvement (PSI) curriculum plus “Dr. D’s Birds and Bees” video in four counties in Arizona: Apache County, Pinal County, Gila County and Yuma County. Program teen facilitators and program staff are trained to teach the PSI program to students in grades four through eight in regular classrooms. The five sessions of PSI are implemented along with one session on human reproduction.

Focus of Demonstration:

This program combines the Postponing Sexual Involvement curriculum with a “Dr. D’s Birds and Bees” video. PSI emphasizes postponing sexual involvement and is designed both to help young people understand social and peer pressure to have sex and to develop and apply resistance skills. It is based on the social influence theory and is taught by peer role models. The human reproduction video gives a detailed explanation of human reproduction and is followed up with discussion among participants. The overall goals for this program are to increase knowledge for the participants, educate the community at large and involve the parents of participants in this educational experience.

Expected Findings/Results:

This project is attempting to significantly decrease the number of teenagers initiating in sexual activity and increase their knowledge in the areas of human sexuality, STDs and HIV/AIDS. Participants should be able to recognize peer pressure, recognize situations which may lead to peer pressure for early initiation of sexual activity and increase their competencies in peer refusal, assertiveness, and decision making skills. Through program activities, participating sites will demonstrate family, community, and political support for abstinence based education coupled with medically accurate information about sexuality, contraception, STDs and HIV/AIDS.

The evaluation plan builds on the ongoing community evaluation strategy, which examines teens' perceptions of issues existing at multiple levels of the ecological context. This approach is informative because the intervention affects more than just the program participants - young people have friends, live in families within communities and attend schools located within communities. For this reason, the program is being evaluated at several levels including the individual, the school, and the community involving a pre-program assessment, a post-program assessment, and a longitudinal assessment.

PROJECT SUMMARY - APH 000362

Agency: Emory University
Grady Memorial Hospital
Box 26158, 80 Butler Street, SE
Atlanta, GA 30335

Project Director: Marion Howard, Ph.D.

Phone Number: (404) 616-3513

Evaluator: William E. Pollard, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School-based

Project Start Date: October 1, 1995

Program Description:

A Three-Tier Approach to Reduction of Sexual Involvement is a preventative project designed to expand the social influence model Postponing Sexual Involvement program so that young people can receive abstinence messages in elementary, middle and high school in a consistent and helpful manner.

The Three-Tier Approach project represents a collaborative effort involving Emory University School of Medicine, Grady Health System, and the State of Georgia Department of Health and Human Services. It involves the cooperation of local Georgia school systems and health departments.

Focus of the Demonstration:

The overall goal of the Three-Tier Approach project is to determine if assisting schools to take a more active role in helping youth to postpone sexual involvement both delays the beginning of sexual involvement and reduces the incidence of teen pregnancy among young people. This goal will be achieved through the expansion of a successful middle school intervention to both elementary and high school levels.

The specific objectives of the evaluation are to determine if, throughout the State of Georgia:

- 1.) Local school sex education review committees will be willing to approve the materials that constitute a three-tier model aimed at helping youth postpone sexual involvement.
- 2.) Local school systems will be willing to have teachers trained to implement a three-tier model aimed at helping youth postpone sexual involvement over a three year period.
- 3.) Teachers, once trained, will actually implement a three-tier model aimed at helping youth postpone sexual involvement over a three year period.
- 4.) An implementation of the interrelated series of abstinence programs for at least a three year period actually affects birth rates of those still of school-age (age 17 and younger).

Expected Findings/Results:

Use of schools is necessary for producing change among larger numbers of youth. Documenting that it is possible to implement such an abstinence intervention in the public schools without major opposition and controversy all the way from 5th grade through 10th grade will go a long way toward encouraging others to attempt needed behavioral change through offering programs in the schools over time. Finally, the lives of youth positively affected by the interventions will mean less disease, less school-age pregnancy, better protection of fertility, and better pregnancy outcomes in the future.

PROJECT SUMMARY - APH 000363

Agency: Inwood House
320 East 82nd Street
New York, NY 10028

Project Director: Pat Maloney

Phone Number: (212) 861-4400

Evaluator: Lisa Lieberman, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School-Based

Project Start Date: October 1, 1995

Program Description:

Inwood House, a non-profit agency serving young people in New York City since 1830, has developed PROJECT IMPACT to address the problem of the early initiation of sexual activity and its negative consequences. PROJECT IMPACT is school-based and designed to help students postpone sexual involvement and protect themselves from pregnancy and disease. PROJECT IMPACT is headed by a clinical social worker at each school site who conducts classroom presentations, leads small group sessions, and provides individual counseling. Because of its focus on younger teens (ages 11 to 13 years), PROJECT IMPACT uses an abstinence based curriculum in both the classroom presentations and the group sessions. The project is an expansion of Inwood Houses' TEEN CHOICE program to three intermediate schools in New York City. In addition to the TEEN CHOICE student activities, a parent educator provides workshops for parents at each of the schools. The parent workshops are designed to assist parents in communicating more openly about sexuality with their children.

Focus of the Demonstration:

PROJECT IMPACT is designed to accomplish the following goals: (1) to assist adolescents in making a healthy transition to adulthood, (2) to prevent/delay the onset of sexual activity, (3) to reduce the incidence of pregnancy and sexually transmitted diseases, and (4) to assist parents in communicating with their children about sexuality.

These goals will be achieved through a combination of small group meetings, classroom dialogues, and individual counseling sessions. TEEN CHOICE social workers are on-site in schools to facilitate on-going communication with students. A parent educator will also provide workshops at each of the schools to assist parents in assuming their role as primary sex educators for their children.

Expected Findings/Results:

The formal evaluation of Project IMPACT is focused on the small group component of the project. The Project uses a pre- post-test written survey with a follow-up at 1 year using both intervention and comparison groups. Intervention and comparison group students are recruited from the same schools in the target area. Comparison group students are drawn from those who were ineligible to participate in Project IMPACT because of conflicting schedules or programmatic requirements.

Inwood House expects that PROJECT IMPACT participants will exhibit an increase in knowledge and attitudes consistent with postponing sexual activity and preventing pregnancy and sexually transmitted disease infection. Higher measurements of self-worth, self-esteem, empowerment and future orientation at post-test should be reported. Participants will report an improved ability to communicate with their parents or other adults about sexuality and other concerns. The participants will be comfortable with postponing sexual activity and will reduce sexual behaviors that lead to unintended pregnancy and/or HIV/STD infection.

PROJECT SUMMARY - APH 000364

Agency: Board of Trustees, University of Arkansas
Health Education Projects Office
120 Ozark Hall
Fayetteville, AR 72701

Project Director: Michael E. Young, Ph.D.

Phone Number: (501) 575-5639

Evaluator: George S. Denny, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School-Based

Project Start Date: October 1, 1995

Program Description:

The Sex Can Wait - Adolescent Family Life (AFL) Project is sponsored by the Health Education Projects Office at the University of Arkansas. This agency provides direct education, teacher/leader training, develops curricula for teaching health related topics, assists schools and communities in implementing programs, conducts research and program evaluation and provides on-going consultation. Abstinence education programs and drug education programs from the Health Education Projects Office are used in a number of communities in Arkansas and across the nation.

The Sex Can Wait project provides teacher training and follow-up implementation assistance to school districts across Arkansas. The project represents a collaborative effort involving the University of Arkansas, the Arkansas Department of Education and local school districts in the state.

Focus of the Demonstration:

The overall program goal is to help young people develop the skills they need to say “no” to sexual involvement, and say “yes” to those things that will help them make a successful transition from adolescence to adulthood.

The evaluation goal is to determine if the project, as implemented is effective in helping young people postpone sexual involvement and reduce the incidence of teen pregnancy.

The project focuses on young people, both adolescent and pre-adolescent males and females, to promote sexual abstinence. Parents are also involved through “parent preview” nights and parent-child homework activities.

The project uses the Sex Can Wait curriculum series in implementing the project. The curriculum is positive in tone, medically accurate and focuses on the development of life skills.

Expected Findings/Results:

The project will demonstrate that schools will use an abstinence education program that includes three different levels. It will further demonstrate that an evaluation of the impact of the program on student outcome variables is possible. It will further demonstrate that this specific abstinence education program is effective in helping young people postpone sexual involvement.

PROJECT SUMMARY - APH 000365

Agency: Alabama Department of Public Health
RSA Tower
201 Monroe Street
Montgomery, AL 36130

Project Director: Phyllis J. Gilchrist, R.N., B.S.N.

Phone Number: (334) 206-5675

Evaluator: Steven Nagy, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1995

Program Description:

The Alabama Adolescent Pregnancy Prevention Project (AAPPP) is an innovative approach to reach the early adolescents of rural and minority populations with a value-based, family centered abstinence message. The project focuses on early adolescents, ages 10-15, their parents and the rural communities.

The AAPPP provides multiple exposures across grade levels five, six, seven, eight, and nine. The AAPPP works intensively in eight rural counties to institute a public awareness campaign. County health department instructors implement the program in the schools and teach the curricula. The community and schools both reinforce parental involvement.

This project provides the method to reiterate the abstinence message through both upper elementary and junior high grade levels, rather than focus on one grade. The Department of Public Health trains local health department instructors to conduct interventions. A parent/student workbook has been developed which facilitates increased parent/student communication to reinforce the parents role in teaching values. The 5th grade curriculum is entitled, Respecting Yourself, developed by the project. Students in the 6th and 7th grades are presented with Postponing Sexual Involvement for Preteens and Young Teens. The Sex Can Wait curriculum was selected for 8th and 9th grades.

Focus of the Demonstration:

The AAPPP goal is to prevent teenage pregnancy by encouraging students to choose abstinence from sexual activity until marriage. Achievement of this goal requires that the program objectives be supported by the following activities: (1) abstinence based education interventions for the first, sixth, seventh, eighth, and ninth grades in the selected communities, (2) adequate training for county health department instructors, and (3) parental involvement through PTA meetings, parent/child discussions and community awareness initiatives.

The AAPPP will focus on communities in the state that average a 20 percent teen pregnancy rate. The communities selected will also have a population of single parent families greater than 25 percent and a population of children living in poverty greater than 30 percent, two antecedents of teen pregnancy.

Expected Findings/Results:

It is expected that the percentage of sexually active adolescents aged 17 and under will be decreased. Data utilized to evaluate this objective will be obtained from student responses. The number of adolescents who have discussed human sexuality and related values with their parents/guardians will be increased.

The number of pregnancies to adolescents 15-17 years of age will be reduced. Overall, teen birth rates, aged 10-19, have decreased slightly from 1991 to 1995. Data evaluating this objective at the county level will be obtained from the Bureau of Vital Statistics, Alabama Department of Public.

The student evaluation will be obtained from student responses to the instrumentation. The current evaluation (pre- and post-tests) is based upon the Theory of Planned Behavior (Ajzen) and examines student attitudes, beliefs, intentions and behaviors in regard to abstinence and coital status.

PROJECT SUMMARY - APH 000366

Agency: Crozer Chester Medical Center
The Wellness Center
1701 Upland Avenue
Chester, PA 19013-5734

Project Director: Rima Himmelstein, M.D.

Phone Number: (610) 490-1755

Evaluator: Michael D. Rosko, Ph.D.

Type of Project: Prevention Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1995

Program Description:

Crozer-Chester Medical Center is a teaching hospital located in Delaware County, Pennsylvania. The Wellness Center is a school-based health center created through a partnership between Crozer-Chester Medical Center and the Chester Upland School District. The Wellness Center provides primary care and mental health services to school-age children and adolescents.

The Delaware County Teen Pregnancy Prevention Program provides abstinence-based education throughout the Chester Upland School District. Chester is the third poorest mid-sized city in America. It is also a city where one out of four children is born to a teenage parent. The school district is approximately ninety percent African American, six percent Hispanic, and four percent Caucasian.

The main function of the program is to present the Postponing Sexual Involvement (PSI) curriculum to students in the Chester Upland School District. All participants will complete an anonymous survey before and after the curriculum is presented in order to evaluate the program's impact. Peer Leaders are students from Chester High School that are hired and trained (20 hours). These high school students, under supervision, facilitate the curricula.

Focus of the Demonstration:

The Delaware County Teen Pregnancy Prevention Program is designed to accomplish the following goals and objectives: (1) to reduce the rate of teen pregnancy in the city of Chester by implementing an abstinence based education program with students across the Chester Upland School District, (2) to raise awareness of the extent of teen pregnancy in the community and its impact, and (3) to gather input from members of the community pertaining to pregnancy prevention through abstinence as they relate to the needs of the community. Input from the community is gathered during meetings held at each school prior to the start of the program.

Expected Findings/Results:

It is anticipated that young teens who receive the PSI curriculum will be more likely to support and practice abstinence than those who do not receive the curriculum, as reflected by their responses to the pre- and post-curriculum surveys. Furthermore, it is anticipated that the longitudinal surveys of ninth grade students will demonstrate that students who received the PSI curricula in eighth grade are more likely to practice and support abstinence than those who did not receive the curricula despite the one year time lapse since intervention. It is also expected that those who were taught the PSI lessons by Peer Leaders will be more likely to support and practice abstinence than those who were taught by adults.

PROJECT SUMMARY - APH 000525

Agency: The Mercy Hospital of Pittsburgh
1400 Locust Street
Pittsburgh, PA 15219

Project Director: Bradley J. Bradford, M.D.

Phone Number: (412) 232-7388

Evaluator: Janine Janosky

Type of Project: Combination Care and Prevention Demonstration Project

Model: Home- School- and Community-Based

Project Start Date: October 1, 1995

Program Description:

The Adolescent Family Life (AFL) Project is sponsored by Mercy Children's Medical Center. This project is a community, school and home-based combination project designed to create a network of care and prevention services to help meet the developmental, physical, emotional, psycho social and educational needs of pre-adolescents, adolescents and their families who reside on the South Side of the City of Pittsburgh in Pennsylvania.

The creation of this network is the result of the enhancement and expansion of pre-existing services to form a comprehensive whole within the target community. With collaborators and partners (Family Resources, Pittsburgh Public Schools, Allegheny County Health Department, and others), the project provides the pre-adolescents and adolescents within the target communities with a seamless continuum of care and prevention services.

Focus of the Demonstration:

This collaborative effort is designed to accomplish the following goals: (1) promote abstinence and reduce pregnancies among pre-adolescents and adolescents in South Side communities; and (2) facilitate the holistic health and well-being of pregnant South Side adolescents, adolescent parents and their children.

Additional targeted results are improved health outcomes, parenting capabilities and enhanced parent-child relationships. These goals are accomplished through the creation of a network of services that focus on strengthening and expanding current services being provided by project partners and collaborators. The care and prevention needs of adolescents are addressed through the provision of age-appropriate education and support provided by both indigenous and professional staff, as well as associated program partners. Programming is made available within the local schools, communities, homes and different health care sites.

Expected Findings/Results:

Participants in the prevention component of the program will demonstrate increased knowledge and more positive attitudes toward abstinence, sexuality, self worth and development of future plans. More pre-adolescent and adolescents will be practicing abstinence in the project population with an associated reduction in the pregnancy rate among these youth.

Those participants utilizing the care components of the initiative will exhibit decreased rates of low birth weight deliveries, infant mortality and pre-term labor as well as increased immunization rates for their children. Overall, participants will demonstrate an increase in attitudes which are health promoting.

PROJECT SUMMARY - APH 000526

Agency: Lula Belle Stewart Center, Inc.
1534 Webb Avenue
Detroit, MI 48206

Project Director: Edna Walker

Phone Number: (313) 867-2372

Evaluator: Melanie Hwalek, Ph.D.

Type of Project: Combination Care and Prevention Demonstration Project

Model: Home- and Community-Based

Project Start Date: October 1, 1995

Program Description:

The Lula Belle Stewart Center is implementing a combination Care and Prevention Adolescent Family Life demonstration project. The care component provides direct counseling, outreach and referral services to pregnant and parenting adolescents and their families. The program also addresses the needs of the teen father or the teen mother's boyfriend. Teen mothers who are eligible for services are under age 19, with a special focus on age 17 and younger. The Prevention element uses three separate curricula components geared to promote communication between parents and their pre-adolescent and adolescent children on sexuality issues.

Program Description:

The primary methods utilized to meet the program's core (10) and supplemental (6) services are home visits, office visits, intensive outreach efforts and various support group sessions. Clinical counseling and referrals to appropriate community resources as according to individual case service needs are conducted by the social work staff.

The Care staff is comprised of social workers, male outreach counselors and social work assistants. The intervention in the Care component consists of the following core and supplemental services: pregnancy testing, maternity counseling, adoption counseling and referral, health services for pregnant and parenting teens and their children, nutrition information, STD screening and testing, referrals for

family planning services, vocational and educational services, and mental health services.

The Prevention component is entitled DESIP (Delaying early Sexual Involvement and Pregnancy). The Prevention component strives to increase the knowledge base and communication between parents, pre-adolescents and adolescent youth. The Prevention staff is comprised of health educators, social work assistants, teen and parent peer counselors, and volunteers. The curriculum and educational materials used in the group educational series are focused on promoting communication, supporting abstinence and providing information for prevention of early pregnancy, venereal disease and HIV/AIDS.

The Prevention component features three elements of service which are PACT, PEAK and Community Education. PACT (Parents and Adolescents Can Talk) meets regularly with parents and their pre-adolescent and adolescent children in a discussion format to focus on planned module topics. The youth groups are led by a teen peer counselor, while the parent activities are facilitated by the health educators and parent peer counselors. PEAK (Parents of Elementary Aged Kids) is a curriculum that provides an educational series to parents only. These sessions are held in public schools. The parent group is led by health educators. Community Education is essentially a one session speaking engagement, presentation or workshop primarily conducted by the health educators or male outreach workers. These sessions discuss topics such as abstinence, prevention of early pregnancy and other sexuality issues. The workshops are attended by youth groups, parent groups or other organizations within the community.

Expected Findings/Results:

Both the Care and Prevention components feature an evaluation process to measure outcomes and effectiveness of services. The geographic service area is urban and includes the city of Detroit and also targets Wayne County residents. The focus population is low income, predominantly African American families.

This project expects to prevent initial pregnancies and STDs in pre-adolescent and adolescent youth through school-based prevention activities. Through the comprehensive case management approach with pregnant and parenting teens, this project also expects to reduce repeat pregnancies and improve the health and welfare of adolescent parents and their children.

PROJECT SUMMARY - APH 000389

Agency: Montclair State University
Department of Health Professionals/PERLS
College Hall, Room 301
Upper Montclair, NJ 07043

Project Director: Joseph Donnelly, Ph.D.

Phone Number: (973) 655-7119

Evaluator: David F. Duncan, D.P.H., C.A.S.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

Montclair State University, New Jersey's only public teaching university, will implement the upper elementary and middle school versions of the Sex Can Wait curriculum in 6th, 7th and 8th grades. Project C.A.R.E. (Community, Awareness, & Relationship Education) will focus on urban northeastern New Jersey, in areas with a high incidence of adolescent pregnancy and sexually transmitted disease.

This project provides an intensive three day training workshop for public school teachers, providing them with the knowledge and skills appropriate for implementing the Sex Can Wait curriculum.

Focus of the Demonstration:

Project C.A.R.E. offers on-site assistance to schools through Parent Preview Nights and other parent-staff interventions as well as in-service training for teachers and classroom teaching assistance.

There are four basic goals for this project: (1) to instill high self-esteem in the participating students, (2) to provide participating students with decision-making and refusal skills, (3) to help participating students learn goal setting skills and work towards meeting their goals, and (4) to develop a positive attitude towards sexual abstinence among participating students.

Expected Findings/Results:

It is expected that the implementation of the Sex Can Wait curriculum will result in an increase of knowledge regarding sexuality, decision-making, and goal setting. The students that are touched by this project will show a positive attitude towards being abstinent and a positive attitude towards delaying sexual intercourse until marriage, as well expressing the intention to remain abstinent. In addition, the project will show an increase in goal-setting behavior and decision-making skills.

PROJECT SUMMARY - APH 000390

Agency: Services United for Mothers and Adolescents (SUMA), Inc.
821 Ezzard Charles Drive
Cincinnati, OH 45203

Project Director: Bernice Washington

Phone Number: (513) 721-7862

Evaluator: Pegi S. Davis

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

Services United for Mothers and Adolescents (SUMA), Inc. has a twenty-five year history of providing services to adolescents in Southwest Ohio and Northern Kentucky. SUMA operates three community-based teen parent centers in the West End, Mt. Auburn and Clermont County. The centers provide young parents and pregnant adolescents with comprehensive social casework services. SUMA operates six pregnancy prevention programs in five inner city neighborhoods.

The new Adolescent Family Life Abstinence Education Demonstration Project provides an array of coordinated, comprehensive and integrated education and support services designed to delay the onset of sexual activity among African American and Appalachian adolescents, ages 9-14, and also reduce the incidence of unplanned pregnancies.

This project builds upon current SUMA projects by linking with city efforts, targeting neighborhoods, and developing collaborative relationships with youth serving agencies in the targeted neighborhoods. The Assertive and Responsible Teens (ART) curriculum uses the concept that the community and family together empower youth to move forward as individuals who are responsible to themselves and to their peers and family. The ART curriculum acknowledges cultural values, experiences, norms and traditions and uses them to shape a pro-active abstinence message directed to community youth.

Focus of the Demonstration:

The ART Project focuses on prevention and youth development strategies in four low-income, urban and predominantly African American neighborhoods, and one low-income, urban and predominantly Appalachian neighborhood. The project approach incorporates rites of passage and youth development strategies in the attainment of assets. It uses respect for family, community and cultural values to promote the delay of sexual activity.

The ART Project focuses on pre-adolescents and adolescents for the purpose of reducing the incidence of unplanned pregnancies. ART achieves its purpose through the accomplishment of set goals and related program objectives designed to build skills, assets, core competencies and develop strategies that will strengthen youth resilience and capacity to choose alternative behaviors.

Some of the major goals of the ART Project are to increase community outreach and awareness of adolescent pregnancy, and to increase youth knowledge of responsibility; culture; importance of community; personal values; physical, emotional and social changes during adolescence; and, personal hygiene.

Expected Findings/Results:

The ART curriculum provides a combination of personal value clarification, education, asset building, leadership development, community awareness and support that together provide an interrelated program that will assist the target audience to develop a healthy outlook on delaying sexual activity and life in general.

Evaluation of the project is built around the central, interrelated themes of the project. The evaluation plan investigates changes in self-esteem, evidence of asset building, risk behavior reduction, and reduction of adolescent pregnancy. Risk behaviors, self-esteem, personal values, and attitudes are assessed through the pre-session and post-session collection.

PROJECT SUMMARY - APH 000391

Agency: Prevention Partners, Inc.
One Mustard Street, Suite 400
Rochester, NY 14609

Project Director: Joseph Calabrese

Phone Number: (716) 288-2800, Ext. 36

Evaluator: Susan Rogers, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

Prevention Partners, Inc. assists the communities of Monroe and surrounding counties in creating a framework in which citizens, community organizations, and policy makers can discuss, advocate, develop, and implement strategies that promote healthy choices as they relate to alcohol, tobacco, other drugs, and associated issues. The Bright Futures Project enhances the current peer led abstinence education for 5th through 8th grade students in 4 sites (2 middle schools, 1 elementary school, and 1 community based organization). The project also provides education to parents of these students centered around communicating with their children about abstinence.

Focus of the Demonstration:

The Managing the Pressures Before Marriage curriculum is used in addition to program enhancements including updated role plays, parent/child homework assignments, and the use of same-age peer leaders to deliver the curriculum in the classroom. The Managing Pressures Before Marriage curriculum is based upon the Postponing Sexual Involvement curriculum that Prevention Partners has used for 3 years. In addition, a stand alone parent component will be developed that will help parents to communicate with their children regarding sexuality issues.

The objectives for the Bright Futures Project are: (1) increase student skills related to maintaining sexual abstinence; (2) increase parents' abilities to positively affect their children's sexual abstinence; and (3) improve teen leaders delivery of abstinence education in the classroom.

The student participants will recognize the psychological, social, and health benefits of abstaining from sexual activity and will recognize and resist peer and social pressures to engage in alcohol, drug use, and sexual activity.

Expected Findings/Results:

The Bright Futures project reaches pre-adolescent females, pre-adolescent males, and adolescent males. In addition, parents attend education sessions and take part in homework assignments in order to facilitate better communication with their children about sexuality issues. Teen leaders and classroom peers take part in 10 training sessions in order to effectively deliver the abstinence education curriculum and facilitate peer learning.

It is anticipated that the results of the Bright Futures project will demonstrate that the prevention of adolescent sexual activity and pregnancy depends primarily on strong family involvement as well as social and community norms which support delayed sexual involvement. By promoting consistent messages about sexual involvement in the school, the home and the community, the program expects to foster more effective communication between parents and young adolescents as well as less teen pregnancy and sexually transmitted diseases. Designing and implementing this intervention should benefit the Monroe county community by reaching pre and young adolescents and parents in schools and community based organizations.

PROJECT SUMMARY - APH 000392

Agency: Syracuse Area Catholic Charities
1654 West Onondaga Street
Syracuse, NY 13204

Project Director: Felicia M. Castricone, M.S.W.

Phone Number: (315) 474-7428

Evaluator: Deborah J. Monahan, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The neighborhood centers of Syracuse Area Catholic Charities offer a wide range of services tailored to meet the unique needs of their target populations. All of the centers offer preschool programs and after-school programs for children and teens, as well as case management services and supportive counseling. The centers also meet basic human needs through food pantries, outreach services and advocacy.

The Family Exploration Project is a prevention demonstration project. The project utilizes a Strengths Perspective model to implement two program interventions; Sexual Health Education Classes for 9 to 14 year old youth and Family Exploration Workshops involving youth with their parent(s)/care giver(s). Six ethnically diverse neighborhoods in Syracuse are served by the project. Each of these neighborhoods is served by a Catholic Charities neighborhood center. Each neighborhood center employs two part-time Sexual Health Educators who teach the classes for youth and facilitate the Family Exploration Workshops.

Focus of the Demonstration:

The overall goal of the project is to help adolescents strive for sexual health through abstinence from adolescent sexual activity. A secondary goal is to help parents/care givers become effective sex educators for their children, thereby reinforcing the message of sexual abstinence. The project incorporates strategies designed to reach both youth, ages 9 to 14, and their parents.

There are 4 main objectives for the youth component in the Family Exploration Project: (1) increase their knowledge of the benefits of sexual abstinence; (2) increase their positive attitudes regarding abstinence; (3) increase their self-control skills and problem-solving strategies; and, (4) increase their positive self-concept.

The adult component has 3 main objectives: (1) active participation in the Family Exploration Workshops, including the completion of family genograms/family histories to convey the importance of family life and facilitate sharing of family values; (2) increase their communication with their children about sexual health issues; and , (3) increase their ability to problem solve family related issues.

The Sexual Health Education courses for youth ages 9 to 14 help preteens and teens develop knowledge and attitudes favorable to abstinence from adolescent premarital sex and corresponding high risk behaviors. The basic tenet of this model is that individuals and families have strengths or competencies (cognitive, emotional, etc.) and their own resources to help to solve problems and gain insight. Through the process of education, counseling and reflection, individuals and families can learn how to turn these strengths that can enable them to face the challenges of adolescence, sexual pressure and peer pressure is the specific target of the intervention.

The Family Exploration Workshops are designed to facilitate communication between parents and youth. Since teens identify their parents as the preferred source of information about sexuality, helping parents improve their communication skills around topics of sexuality has important implications for adolescent abstinence. Family histories are used to encourage sharing of family experiences, values, and insights. Starting with a genogram, each participating family develops a creative presentation of their family history during the 12-week workshop sessions. The Workshops run concurrently with the Sexual Health Education Curriculum, with workshops held in the evenings or weekends.

Expected Findings/Results:

All participating youth will be pre and post tested on their acquisition of knowledge and attitudes supportive of sexual health and their results will be compared with a control group. Parents/ care givers will be pre and post tested on their communication skills and family problem-solving skills. We anticipate gains in knowledge and attitudes favorable to abstinence from adolescent sexual behavior, as well as improved communication skills.

PROJECT SUMMARY - APH 000393

Agency: YWCA of Greater Baton Rouge
250 South Foster Drive
Baton Rouge, LA 70806

Project Director: Kathryn Farris, MS, L.P.C.

Phone Number: (504) 926-3820

Evaluator: Glenn Jones, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based, In-School Model

Project Start Date: October 1, 1997

Program Description:

The YWCA of Greater Baton Rouge provides a broad range of services for women and children including: breast cancer prevention, women's financial programs, literacy programs, day care, parenting programs for teens and adults, after school enrichment, and in-school HIV and pregnancy prevention programs. This AFL project provides a five-day in-school abstinence education program to sixth and seventh grade students in East Baton Rouge and West Feliciana Parishes. The primary curriculum used is Managing Pressures Before Marriage augmented by a sexual abuse prevention session developed from the Relationships and Power curriculum. Trained peer and adult educators provide sessions to randomly selected classes. In addition to this core curriculum, randomly selected seventh grade classes receive sexuality/HIV prevention education through an original curriculum, You & Me & HIV. Parents are involved in their child's abstinence education through special sessions at each school location, and will provide evaluation feedback through focus groups.

Focus of the Demonstration:

The overall goal of the demonstration is to determine which of the four cohort groups in the seventh grade and which of the three cohort groups in the sixth grade is most effective in delaying sexual activity among preteens and young teens.

The project implements a combination of seven strategies for assisting participants in postponing

sexual involvement until marriage. The seven strategies are: (1) increasing skills in recognizing pressure as a violation of individual rights in social situations; (2) building refusal skills and ability to cope with negative peer pressure situations; (3) recognizing and rejecting unhealthy media influences; (4) increasing ability to understand and cope with developing sexual feelings in healthy ways and to get accurate information; (5) increasing positive communication between students and parents regarding sex and values; (6) increasing awareness of sexual abuse issues including prevention and resources for survivors of sexual abuse; and (7) helping youth to delay sexual activity until marriage and providing clear goals and values which support this goal.

Expected Findings/Results:

The demonstration strongly focuses on middle school students unlikely to be sexually active (6th and 7th grade levels) since research supports abstinence education's efficacy with this age and experience. Recent studies which reveal a high correlation between sexual abuse, subsequent high levels of sexual risk and teen pregnancy were the rationale for developing a session addressing sexual abuse. You & ME & HIV is an original curriculum which has been intensely evaluated with positive results.

Surveys designed to measure attitude and behavioral intention about abstinence and having sex are administered before program implementation, six weeks following the program, and at school year's end.

PROJECT SUMMARY - APH 000394

Agency: Rosalie Manor, Inc.
4803 West Burleigh Street
Milwaukee, WI 53210

Project Director: Marty Kerrigan

Phone Number: (414) 449-2868

Evaluator: Barbara Goldberg

Type of Project: Abstinence Education Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1997

Program Description:

Rosalie Manor, Inc. is a nonprofit social service agency serving families living in Milwaukee County. The project implemented by Rosalie Manor is an expansion of Families United To Prevent Teen Pregnancy (FUPTP), a family centered, value-based curriculum for abstinence education which was developed through AFL funds. The program is implemented as an after school program on a daily basis and supplemented by classroom presentations of parts of the FUPTP curriculum. Boys and girls between the ages of 9 and 15 are the target population drawn from minority cultures and from families with incomes below the poverty level. Each participating school has a FUPTP Program staff member, a para-professional and a teen mentor to deliver the program services.

Focus of the Demonstration:

The purpose of this program is to find effective means of preventing pregnancy by encouraging adolescents to abstain from sexual activity through provision of age-appropriate education on sexuality and decision making skills.

The program is based on the premise that , by providing primary prevention activities that promote abstinence with a life options approach, the Families United to Prevent Teen Pregnancy program will reduce the incidence of pregnancy among participating at-risk pre-adolescent and adolescents.

The FUPTP project strengthens the role of parents and other adult family members in promoting abstinence by increasing their understanding of, involvement in, and responsibility for adolescent pregnancy prevention within their families.

The project facilitates the development of responsible sexual behavior among participating teens by offering education and activities that promotes abstinence, increases self-esteem, self-discipline, decision-making skills, and problem solving skills as well as offers opportunities for participation to teachers, parents, and program participants.

Participating families are connected with neighborhood based services, community organizations, and other public or private sector groups that can strengthen the family and improve its capacity to deal with issues of adolescent sexuality and pregnancy.

Expected Findings/Results:

Part of the evaluation design includes pre- and post-tests of sexual knowledge, including attitude toward abstinence as a form of measuring the impact of the curriculum in this area. Measures have been selected to reflect each student's home environment, academic achievement levels and progress in school, and perception of himself or herself as a person. Data on program involvement is collected on each participant (the youth and their parents). An intensive psycho-social interview is conducted with each youth at the beginning of the school year to collect information on the extent to which the program is reaching the targeted population, the existence of family support, the impact of violence, and other issues. At the conclusion of the session, the Profiles of Student Life: Attitudes and Behaviors is completed by the students to identify asset development. Each evaluation instrument is administered to a control group. Additionally, student writings are analyzed for evidence of understanding and expression of self-esteem, personal values, and attitudes. Finally, the understanding and support of the community will be investigated through the Staff Implementation Survey.

PROJECT SUMMARY APH 000395

Agency: The Rape and Victim Assistance Center of
Schuylkill County
368 South Centre Street
Pottsville, PA 17901

Project Director: Mary Beth Semerod

Phone Number: (717) 628-2965

Evaluator: David A. Zanis, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Rape and Victim Assistance Center (RVAC) of Schuylkill County provides victim services within the community since 1983. Schuylkill County is a rural community located in the northeastern region of the Commonwealth of Pennsylvania, which covers a geographic region of approximately 779 square miles, and has a population of approximately 153,000. The county consists of many small boroughs and villages and one city, Pottsville, which is the county seat. The local educational system consists of twelve school districts.

The SEXUALITY AWARENESS CURRICULUM PROJECT is specifically designed to increase awareness and nurture healthy attitudes about sexuality and sexual behavior among adolescents in Schuylkill County as a means to foster sexual abstinence among this target population. In addition, the purpose of this project is to utilize parents, human service providers and members of the community as a supportive network to assist in this educational process. The project includes the implementation of school-based prevention programs, professional training, parent and community programs. The project assists adolescent boys and girls to understand decision making related to sexuality and early sexual behavior by exploring self esteem, communication, values, vulnerability factors such as drug and alcohol use and its impact upon decision making power, and teen pregnancy and its consequences.

Focus of the Demonstration:

RVAC has developed a sexuality awareness curriculum (abstinence based) that consists of a ten session series of education programs to be presented to 7th and 8th grade students in two local schools. The approach of this project consists of a coordinated delivery system that will provide children with a strong sexual abstinence message while also providing supportive information related to decision making and communication. The strength of this curriculum hinges upon a coordination of all systems which include: Parents, educators, and social services.

The project addresses 4 main objectives: Students who receive the Sexuality Awareness Curriculum will: (1) demonstrate a significantly higher commitment to sexual abstinence; (2) will demonstrate a significantly higher level of identification to positive social skills/values than students who do not receive the curriculum; (3) Students who receive the Sexuality Awareness Curriculum and whose parents receive the Sexuality Awareness Curriculum will demonstrate a significantly higher commitment to sexual abstinence than those students who participate but their parents do not receive the curriculum; and (4) Students who receive the Sexuality Awareness Curriculum and whose parents receive the Sexuality Awareness Curriculum will demonstrate a significantly higher level of identification with positive social values than students who receive the Sexuality Awareness Curriculum and whose parents do not receive the curriculum.

Expected Findings/Results:

Evaluation instruments utilized in the project measure perception of family cohesiveness, student teacher affinity, attitude toward school, self-esteem, and basic and advanced social values. In addition, assessment is focused on adolescents' level of functioning across multiple domains (mental health, drug/alcohol use, peer relationships, school functioning, legal history, sexuality and family relationships).

The Evaluation design is comprised of 2 factors with Factor One consisting of an experimental and a comparison condition in which both conditions receive a Personal Safety Curriculum and the experimental group receives an additional Sexuality Awareness Curriculum. Factor Two consists of different sites (schools) within that condition. Additionally, within the experimental condition, one site (school) receives a parent curriculum which focuses on sexual awareness and child/parent values and activities associated with appropriate communication techniques which fosters sexual abstinence.

A sample of students from each school is asked to participate in a focus group. The purpose of these groups is to gain an understanding of the qualitative impact of the abstinence based curriculum and to assess the feasibility of the project.

PROJECT SUMMARY APH 000396

Agency: Crime Prevention Association
230 South Broad Street
Philadelphia, PA 19102

Project Director: Elise Schiller

Phone Number: (215) 763-0900. Ext. 124

Evaluator: Seymour J. Rosenthal

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Crime Prevention Association provides child care programs, health education, drug treatment, mental health services, employment and training, and other community service activities in North Central Philadelphia, Mantua and South Philadelphia. This AFL Abstinence Education Demonstration uses the Parent/Child Partnership for Learning curriculum, Child Care Reality Immersion Program and the implementation of the Smart Moves curriculum in the R.W. Brown After School and Evening recreation program. This program targets adolescents and pre-adolescent youth from the ages of 9 through 14 and their parents. Approximately 75% of the participants will be African-American, 15% will be Hispanic and 10% will be white or Asian-American. The project staff is comprised of: Project Director, Early Childhood Specialist, Prevention Specialist and Administrative Assistant. Extended staff includes participation from the Day Care staff and After School and Evening program staff. The project is located at a neighborhood community center in North Central Philadelphia.

Focus of the Demonstration:

The project attempts to accomplish the following objectives with the 9 to 14 year old participants: (1) teach about the social, psychological, and health gains to be realized by abstaining from sexual activity; (2) teach that abstinence is the best approach to avoiding the dangers associated with engaging in sexual activity at an early age; (3) teach of the dangers and consequences associated with

engaging in sexual activity at an early age; (4) teach that abstinence from sexual activity is the expected standard for all school age children; (5) teach how to identify and resist peer and media pressure; (6) teach how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and (7) teach how to develop and improve decision-making skills.

The project strives to accomplish the following objectives with the parents of the 9 to 14 year old participants: (1) teach parents how to speak with their children about sensitive issues related to sexual activity; (2) teach parents how to teach their children that a mutually faithful monogamous relationship in context of a marriage is the expected standard for human sexual activity; and, (3) teach parents how to teach their children to abstain from all sexual activity and how to help the child overcome peer pressure to engage in sexual activity.

The project strongly focuses on male and female pre-adolescents and adolescents ages 9 through 14 years old and their parents/families for the purposes of promoting abstinence education.

The Crime Prevention Association uses three different curricula for implementation of the project. The Parent/Child Partnership for Learning curriculum provides opportunities for parents to learn ways to educate their children about sexual issues. This curriculum provides joint activities that helps to build confidence in the parents when discussing sexual activity, and provides solid information to the child on how to resist peer pressure and make good decisions regarding sexual choices.

The second curriculum that will be used in the project is Child Care Reality Immersion. Children in the Day Camp and After School Program will be linked with a specific child in the day care center. Under supervision, the adolescent will visit that child for a period of time and will be involved in all aspects of the infant's care. Discussion will be guided toward helping the adolescents to see that teenagers are not equipped to meet the needs of infants and toddlers and to help them realize what they would be giving up by becoming parents.

The SMART MOVES curriculum develops strong communication and assertiveness skills. SMART MOVES is an activity-based program using games, sports, drama and computer activities.

Expected Findings/Results:

The evaluation plan has two primary goals: (1) the Process Evaluation will to assess the extent to which Crime Prevention Association has accomplished its stated tasks and performed its stated activities; (2) the Outcome Evaluation will document and analyze the success, or lack thereof, of the pregnancy prevention strategies of Crime Prevention Association.

PROJECT SUMMARY APH 000397

Agency: TeenLink - Community (TLC) Project
YMCA of San Diego County
Youth and Family Services Department
4776 El Cajon Boulevard, Suite 206
San Diego, CA 92115

Project Director: Guadalupe Meza

Phone Number: (619) 229-9422

Evaluator: Joann Hoffman, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Adolescent Family Life (AFL) Pilot Project implemented by the YMCA of San Diego County, is a collaboration with Family Service Association of San Diego, Jewish Family Service and Home Start, Inc. This group provides after school programming, Sibling/Friend Support Groups, and Sibling/Friend Mentors. In addition to the three major components, resident physicians from the University of California, San Diego Community Pediatrics Division visit the Pryde youth four times per year for a 4 - week session to talk about healthy behaviors, including abstinence from sexual activity. Students Thinking Over Parenthood (STOP) give middle-school aged youth, both male and female, the opportunity to experience full time parenthood for a short time. Infant Simulators are assigned for a three-day period during which students are totally responsible for that infant's care. Each activity helps high-risk youth in the Mid City area of San Diego to create and actualize a vision for themselves, develop a sense of responsibility, gain an awareness of healthy behaviors and, in turn, increase their resiliency.

Focus of the Demonstration:

The project provides an abstinence based prevention and community and youth development focus to youth ages 9-14 using the YMCA PRYDE curriculum and the Sex Can Wait, curriculum as the educational base.

The project has three main objectives: (1) youth enrolled in the enhanced YMCA PRYDE program will show an increase in knowledge, attitude and behaviors related to abstinence and teen pregnancy prevention, as compared to youth not enrolled in the enhanced YMCA PRYDE program; (2) youth enrolled in the Sibling/Friend Support Group will show an increase in resiliency, as compared to youth not enrolled; and (3) youth matched with an adult mentor will show an increase in resiliency, as compared to youth not enrolled in the mentor program.

The following activities take place to accomplish the objectives: (1) enroll youth in the after-school program which will provide social skills development, gang awareness and prevention, tobacco and drug education, conflict resolution, leadership training and communication skills; (2) conduct baseline assessments of knowledge, attitudes and behaviors regarding abstinence and teen pregnancy prevention; (3) educate youth in the positive health aspects of refraining from sexual activities, to share community resources, and to serve as a career model to the youth; (4) participate in STOP program (computerized lifelike baby care-taking) conduct family intake meetings, hold group discussions; (5) hold rap sessions in a supportive, non-threatening atmosphere; (6) recruit, train and match mentors with mentees, and hold weekly meetings with the mentees.

Expected Findings/Results:

The following instruments are utilized for collection of youth data: (1) the generic Teen Pregnancy Prevention Pre-Posts Test of Knowledge - Attitudes - Behavior (KAB); (2) The PRESS Scale of Perceived Resiliency, Esteem and Social Support; and (3) The Individual Protective Factors Index (IPFI) which is not specific to teen pregnancy prevention but does capture some resiliency data.

A quasi-experimental design is in use which the designated YMCA PRYDE site participants enrolled in the TeenLink Community (TLC) Project will be matched and compared to 1 to 2 YMCA PRYDE programs that are in place throughout San Diego County. Since all PRYDE participants at the various YMCA sites are recruited by school, social service agency and staff referrals, comparison groups not implementing the modified PRYDE curriculum are readily accessible as quasi "control" groups for comparison purposes. With each round of data, results will be presented to inform and guide program coordinators of collective client profiles, staff perceptions and/or preliminary program impact, with implications for program refinement and modification.

PROJECT SUMMARY APH 000398

Agency: First American Prevention Center
P.O. Box 529
Bayfield, WI 54814

Project Director: Ronald E. DePerry

Phone Number: (608) 262-5948

Evaluator: Kit Van Steele

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Anishinabek Family Values Project is sponsored by the Red Cliff Band of Lake Superior Chippewa Indians/First American Prevention Center. This agency provides training, technical assistance, program development and a broad range of prevention programming to the Red Cliff Tribal community as well as other Tribal communities across the nation and Canada. The mission of the Center is to translate indigenous teachings into life long learning experiences.

The Adolescent Family Life Abstinence Education Demonstration Project has developed a culturally-based curriculum that promotes strong identification with tribal values and teachings which reinforce sexual abstinence and family responsibility among the target youth. The curriculum is geared towards Tribal Children between the ages of 9 and 14.

Focus of the Demonstration:

The curriculum incorporates traditional tribal teachings into interactive lesson plans which reinforce family responsibility and family values regarding sexual abstinence as the only sure means of preventing teenage pregnancy. The project goals relate to increasing resiliency and protective factors for targeted youth and their parents. The project targets at-risk youth between the ages of 9 and 14 who reside on the Red Cliff Indian Reservation.

Expected Findings/Results:

The evaluation plan addresses process activities which document the development of the curriculum. The Evaluator makes regular visits to the project site to interview project staff, participants, parents and stakeholders. The interviews help identify progress and barriers encountered during planning, development, and implementation of the curriculum. Feedback from the students, parents and tribal community is integrated into the project for the purpose of program improvement. Chronicling the evolution of the project and curriculum in this way provides a valuable record of the development process.

PROJECT SUMMARY APH 000399

Agency: Southern California Youth and Family Center
101 North La Brea Avenue, Suite #100
Inglewood, CA 90301

Project Director: Carolyn Williams

Phone Number: (310) 671-1222, Ext. 129

Evaluator: Diane DeAnda, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School- and Community-Based

Project Start: October 1, 1997

Program Description:

The Southern California Youth and Family Center's mission is to enable young people, particularly those who are at-risk, to expand their options and opportunities so that they may realize their potential and take their place as productive members of society. The Center offers intervention services for pregnant and parenting teenagers as well as outreach prevention programs that include Family Life Education, HIV/AIDS Prevention Education, Violence Prevention Programs, Teen Advocate Programs, and a Male Involvement Program. Key Project collaborators are the Inglewood Unified School District, the Lennox School District, and the Inglewood YMCA.

The AFL Abstinence Education Demonstration Project provides participating young people with the knowledge and skills they must have to successfully overcome the temptation of early sexual experimentation throughout their adolescence until marriage. The Project helps participating pre-adolescents and young adolescents, ages 9-14, develop healthy attitudes about sex with an emphasis on accepting the concept of abstinence from sexual activities as an appropriate and self-affirming value. The AABLE Project is a school- and community-based local prevention demonstration project that uses the Managing Pressures Before Marriage curriculum combined with appropriate supportive services from both participating youth and their families. After-school mentoring activities take place to reinforce the abstinence message.

Focus of the Demonstration:

The project strongly focuses on pre-sexually active pre-adolescents and adolescents and their families for purposes of promoting abstinence and preventing pregnancies.

The Youth and Family Center staff employ a number of methods to access and engage the hard-to-reach, at-risk groups in pregnancy prevention activities. Some of these methods include: (1) expanding referral networks with the Department of Children Family Services (DCFS) in order to identify teen victims of sexual abuse and involve them in pregnancy prevention support groups; and (2) using non-traditional outreach and practical support methods to identify young adolescent potential participants using informal kinship and neighborhood networks within the Latino and African-American communities.

The project has two main goals: (1) to reduce the number of teenage and unwed pregnancies and the number of children who grow up in fatherless homes through abstinence education, and related support services; and (2) to raise the awareness and mobilize the community to reduce teen/unwed pregnancy by serving as an organizational resource.

Expected Findings/Results:

This project expects to see a measurable decrease in the rate of reported teen pregnancies in the target community, and an increased rate of participants who report abstinence from sexual activities.

PROJECT SUMMARY APH 000400

Agency: Morehouse School of Medicine
Health Promotion Resource Center
720 Westview Drive, S.W.
Atlanta, GA 30310-1495

Project Director: Mary Langley, R.N., M.P.H.

Phone Number: (404) 752-1642

Evaluator: Roland Welmaker, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The primary focus of the diverse projects administered by the Health Promotion Resource Center (HPRC) at the Morehouse School of Medicine is health promotion and prevention in African American populations through community-based organizations and institutions in both urban and rural communities. The AFL Abstinence Education Demonstration Project is a comprehensive program that incorporates prevention strategies that build developmental assets to help youth succeed in life. The target population for the project is elementary students (grades 4 - 6). A parenting education program is a major component of this project. Project Right CHOICES is an after school program that is provided through a collaborative effort involving the HPRC at Morehouse School of Medicine, Clay County Improvement Association (a local community-based organization), Clay County Elementary School and New Horizon Community Service Board.

Focus of the Demonstration:

The goal of this intervention is the prevention of the initiation of sexual activity, alcohol, tobacco and other drug use, as well as other negative problem behaviors among the target population. This demonstration project has five outcome objectives which focus on increasing program participants' overall academic performance and basic knowledge about the risks and consequences associated with sexual activity, drug use and other unhealthy behaviors. Program strategies designed for the target

population include educational sessions which emphasize abstinence from sexual activity outside of marriage; and opportunities for participation in structured after school activities that help to improve academic performance, build social skills, increase self-esteem, and create future goals. The project also includes parenting education, mentoring and strategies to generate community involvement and support.

Project Right CHOICES uses the Managing Pressures Before Marriage curriculum, and Building Resilient Children: A Family Education Approach for Healthy Children which is a parenting program for parents of elementary school age children.

Expected Findings/Results:

Project Right CHOICES intervention is based upon the concept that the greater the number of developmental assets found in a child then the greater the possibility that the child will refrain from premarital sex, substance abuse, incidents of violence or disruptive behavior, and school absenteeism or dropout; there would be fewer incidents of disciplinary actions, and academic performance is more likely to increase. The basis of evaluation of the intervention is a determination of the degree to which program goal and objectives are achieved in relation to knowledge gain and behaviors exhibited or changed.

The Evaluation plan investigates the following hypothesis: that the project will increase knowledge gain regarding reproductive health, pregnancy, STDs, and related topics, and will instill the determination to practice abstinence before adulthood and refrain from substance abuse.

PROJECT SUMMARY APH 000401

Agency: Boys & Girls Club of the Northern Cheyenne Nation
P.O. Box 309
Lame Deer, MT 59043

Project Director: Rick Robinson

Phone Number: (406) 477-6654

Evaluator: Arthur L. McDonald, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Boys & Girls Club of the Northern Cheyenne Nation provides educational, emotional, physical, cultural and social needs to the youth in the five communities of the Northern Cheyenne Indian Reservation. These services are offered through varied programs which include: SMART Moves, SMART Kids, SMART Girls, Act SMART, which are alcohol, drugs, tobacco, and pregnancy prevention programs, and other activities. The new AFL Abstinence Education Demonstration Project provides services with the main focus centering on the SMART Moves curriculum. The clients involved in program activities are youth ages 5 - 18, mainly from the Northern Cheyenne Indian Reservations.

Focus of the Demonstration:

The project has four major goals, described in the following: (1) reduce the incidents of teenage pregnancies by offering alternative and healthy activities in conjunction with educational materials; (2) provide youth with educational information that will enable them to make mature decisions; (3) provide youth with leadership, decision making skills and opportunities; and (4) find innovative and fresh approaches to show youth that they matter to our community.

This project strongly focuses on adolescents, pre-adolescents, females and males. Families are encouraged to attend a support group for teenagers and their parents to open the lines of communication.

The project uses the SMART Moves curriculum which is a primary prevention program that helps young people resist alcohol, tobacco and other drug use as well as premature sexual behavior. The program includes small group activities and special events designed to increase participants' peer support, lock-in, graduation dance, enhance life-skills, build resiliency and strengthen leadership skills. Staff, parents and community wide support are incorporated. The project implements the four components of the complete SMART Moves curriculum: SMART Kids for 5-9 year old children; Act SMART, a new HIV/AIDS prevention program designed for members ages 5-18; SMART Girls program for girls ages 10 - 19; and Baby SMART Moves for ages 5-19 designed to educate and inform all children about the responsibility of having a baby.

Expected Findings/Results:

The evaluation is comprised of data collection, evaluation of the programs, surveys for the community and the youth about the effectiveness of each program. The evaluation compares the data collected using the risk focus survey and comparisons of segments of an Indian Health Service Survey of risky behaviors among Montana Native American Youth (taken in 1992). The staff is trained by two psychologists affiliated with the University of Montana.

PROJECT SUMMARY APH 000402

Agency: Nevada Public Health Foundation
One East First Street, Suite 806
Reno, NV 89501

Project Director: Brenda Irwin

Phone Number: (702) 687-4885

Evaluator: Ronald C. Dillehay, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Responding to Youth: Parent Education on Adolescent Development Program is an Adolescent Family Life (AFL) demonstration project sponsored by the Nevada Public Health Foundation in cooperation with the Nevada State Health Division.

The project consists of two phases. During the first phase a statewide two-day training will be offered using curriculum education. A third day of training will be available to applicants who are committed to implementing the curriculum in their community. Trainers will agree to provide 16 hours, or one complete training, to parents and families in the community.

The second phase targets the six counties in Nevada with the highest teen pregnancy rates. Trainers in these communities will receive compensation each time they facilitate classes in their community using the curriculum. Additionally, media messages are developed to market the course and to promote its importance to parents of pre-adolescents and adolescents, as well as for those adults working with youth. Written materials, such as brochures and referral directories, are made available to parents and participants.

The Responding to Youth: Parent Education on Adolescent Development curriculum, originally developed by the Center for Continuing Education in Adolescent Health, has been modified to be more appropriate for parents and community members and to incorporate abstinence education information and strategies.

Focus of the Demonstration:

The project goal is to educate parents and adults on adolescent development, thus enabling them to communicate more effectively with their pre-adolescent and adolescent children about abstinence education and personal responsibility.

There are six project objectives devised to achieve the goals: (1) parents who participate in the workshops will have an increased knowledge about adolescent development; (2) parents will be able to establish age-appropriate expectations for their children; (3) parents will be able to communicate more effectively with their children; (4) the participating children will see a change in their parent's comfort level and communication ability; (5) the media campaign will draw community-wide participation; and (6) increased parent involvement and communication with the children will result in more teens choosing abstinence, thus reducing the teen pregnancy rate in Nevada.

Expected Findings/Results:

The evaluation of Phase I includes documenting the knowledge gained by those attending the statewide workshop and the number of participants willing to serve as trainers for their own communities. Process evaluation data is also collected in the training implementation.

PROJECT SUMMARY APH 000403

Agency: Boys & Girls Club of Sarasota County, Inc.
3100 Fruitville Road
Sarasota, FL 34237

Project Director: Betty McQueen

Phone Number: (941) 925-5888

Evaluator: Richard J. Jackson, Ed.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Ready Set Go Program is being implemented in three Boys and Girls Clubs in Sarasota County as an after-school program designed to prepare at-risk youth for a positive future by helping them discover and build self-worth, practice decision-making skills, identify their talents and abilities, and set career goals. Family participation is encouraged. The target audience is eleven to eighteen year old adolescents participating in the activities of the Boys and Girls Clubs of Sarasota.

The Ready Set Go Program has three components. The “Getting Ready” for a successful future is the goal of the first component. Small-group and hands-on experiences prepare participants for adulthood in reality-based educational experiences. The “Getting Set” for opportunities in the world of work is the goal of the second component. It allows youth to look at their possibilities and promises for positive futures by building on responsibilities emphasized by the “Getting Ready” component. The last program component, “Go,” provides positive work or mentoring experiences for teens. The adolescents have the opportunity to explore careers in the areas of interest.

Focus of Demonstration:

The intervention being tested is adolescent pregnancy prevention through teaching that sexual abstinence is a viable lifestyle prior to marriage. It provides alternatives for youth in regards to exploring what they can do in their lives if they do not become sexually active and have a child prior to marriage. This is accomplished by providing responsibility training, addressing issues of drug, alcohol and tobacco use, and violence prevention, and by setting and exploring career goals and job-related experiences. The project uses a combination of materials including Managing Pressures Before Marriage, Second Step, a violence prevention curriculum, and Smart Moves, a curriculum developed by the Boys and Girls Clubs of America which addresses drug/alcohol abuse.

Expected Results/Findings:

This project seeks to have participants identify and be placed in the types of jobs for which they are best suited for. The project strives to help keep the participants enrolled in school, and remain drug and alcohol free while involved in the program activities. It is hoped that the participants will continue their education in college or trade school and understand and utilize resistance skills for pressure to have premarital sex.

A pre- and post-test assessment is delivered after focus groups of youth are conducted to make necessary changes to the instruments. Group sessions are continuous in order to assess the progress of the project and to record general themes and suggestions for implementation.

PROJECT SUMMARY APH 000404

Agency: Gold Coast Community Services
309 N. Seacrest Blvd.
Boynton Beach, FL 33435

Project Director: Phyllis Dolislager

Phone Number: (561) 478-2644

Evaluator: Ronald C. Nyhan, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1997

Program Description:

The Gold Coast Community Services agency provides crisis counseling and practical assistance to women and teens involved in unplanned pregnancy in Palm Beach and Broward Counties. Since its inception, Gold Coast Community Services has counseled teens to abstain from sexual activity as the best choice to avoid pregnancy and sexually transmitted diseases. The AFL Abstinence Education Demonstration Project provides three to four classroom sessions to students and educational seminars for students and family members. Both formats focus on building healthy relationships through abstinence education.

Focus of the Demonstration:

The overall objective of this project is to provide a positive, long-term, prevention-oriented solution to teen sexual involvement and its devastating consequences. Students are equipped with information and emotional support to help them resist peer pressure. The Sex Can Wait curriculum for middle school is implemented in program activities. This abstinence education curriculum includes sections on positive benefits of self-control through sexual abstinence consequences of premarital sexual activity and awareness of adoption possibilities. Education in the form of skits, videos, group activities, peer testimonies, and mentoring provide positive peer pressure to abstain.

Expected Findings/Results:

This project utilizes a quantitative and a qualitative analysis of the changes in: (1) knowledge about advantages of sexual abstinence and the consequences of sexual activity; (2) the extend of attitudes toward sexual abstinence; and (3) the change in behavior of adolescents.

Within the evaluation, the project uses three tools designed to implement the analysis. A pre-test is administered, and a post-test is administered immediately after project implementation to measure knowledge, attitude and behavior changes. A second post-test instrument is given six months after implementation to measure further changes in attitude and behavior. Qualitative analysis includes interviews and focus groups with students and administrators.

PROJECT SUMMARY APH 000405

Agency: City College San Francisco, Southeast Campus
City College Adolescent Pregnancy Prevention Program
1400 Evans Avenue, Room 225
San Francisco, CA 94124

Project Director: Robert Baillie

Phone Number: (415) 550-4456

Evaluator: Robynn Battle, Ed.D., M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1997

Program Description:

The City College of San Francisco, Southeast Campus C-CAPP project provides educational pregnancy prevention services and individual counseling and referral services to students (grades 8-12) within the San Francisco Unified School District (SFUSD). Young adults who became parents as teenagers are trained and hired as peer health educators to provide classroom instruction, one-on-one counseling, and referral services. C-CAPP provides pregnancy prevention services throughout San Francisco but concentrates services in the following at-risk communities: Mission, Bayview-Hunter's Point, Western Addition, Ingleside, Visitacion Valley, and Potrero Hill districts. Services are provided to SFUSD middle schools and high schools, community based organizations, hospitals, foster care homes, and juvenile detention facilities.

Focus of the Demonstration:

The C-CAPP project trained 10-12 peer health educators in all aspects of this program including classroom instruction, one-on-one counseling, risk assessment and referral. The C-CAPP project delivers the pregnancy prevention curriculum over eight consecutive days in SFUSD middle and high schools, community based organizations, foster care homes and the juvenile detention facility. Youth are recruited to receive one-on-one counseling and possible referral to outside agencies.

Peer group norms and beliefs about peer behaviors can influence health behaviors. By utilizing young adults, who had children in their teens, it will promote healthful norms by fostering the development of highly visible peer groups whose behaviors discourage other youth from engaging in high-risk sexual behavior. By utilizing "older teen parents" as peer health educators, students consistently reported an increased amount of confidence and "believability" in the message to abstain from sex.

Through the project, the students demonstrate an increase in knowledge, skills, and intent to change behavior, understanding that abstinence is the only family planning method that is 100% effective, and that other family planning methods can put them at risk for pregnancy and sexually transmitted diseases. The students also demonstrate an increase in knowledge of all the consequences of early sexual activity: The discussion topics include teen pregnancy, STDs, and other health related issues in addition to, the social, intellectual, emotional (e.g. drop-out, lack of self-esteem), and financial costs for the individual, family, community and nation.

At-risk adolescent students are targeted to receive individual counseling and possible referral to community agencies which provide additional resources. These at-risk adolescents are also assigned adult role model with whom they can become comfortable with in discussing personal issues.

Expected Findings/Results:

The evaluation addresses measurable increases in knowledge, skills, and intent to change in abstaining from early sexual activity and the prevention of teen pregnancy.

The impact evaluation is designed to measure changes in behavior, knowledge and attitudes of program participants pre and post intervention. The program is measured at baseline and post-intervention. Due to time constraints and the ethical dilemmas involved in utilizing a control group, the intervention serves as its own control.

PROJECT SUMMARY APH 000406

Agency: Denver Health and Hospitals Authority
777 Bannock Street
MC 1914
Denver, CO 80204

Project Director: Barbara Allen Ford

Phone Number: (303) 436-7654

Evaluator: Patricia F. Uris, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

This program uses a multi-component strategy furnishing abstinence education, cognitive thinking skills training, content education, and high risk student case management and support. Abstinence education is offered to all the students at five middle schools. A bilingual Case Manager at each school teaches critical thinking skills and assists students to apply lessons to abstinence education lessons as well as other risk reduction education programs. The Case Manager applies case management to girls identified as being high risk for pregnancy by teachers, school counselors and school-based health center personnel. The case management sessions consist of weekly contact with girls to assist them in applying skills learned during the Positive Life Choices Program (PLC) training. The Case Manager supports the school in implementing programs which teach critical thinking skills and encourage healthy behavior among the entire student body. A bilingual Parent Health Educator provides individual education to parents of particularly high risk girls. The Parent Health Educator also assists in developing parent educational programs for the middle schools and feeder elementary schools.

Focus of the Demonstration:

The project focuses on the Case Manager as an accessible and sympathetic adult who will assist at-risk girls in applying skills learned in the classroom; and targeted parent education.

The main objectives are: (1) to involve parents in education programs and in strategies for promoting and encouraging abstinence among their middle school students; (2) to provide critical thinking skills to students in the 6th, 7th, and 8th grades; (3) to provide case management and support services to high risk middle school age students, primarily girls, who are enrolled in the critical thinking skills classes; and (4) to provide abstinence education to students attending five targeted middle schools.

This AFL project uses the Positive Life Choices (PLC) curriculum, which is a scripted cognitive skills development curriculum and the Managing Pressures Before Marriage curriculum. The PLC curriculum is currently used in two Colorado programs, on which this new AFL project is modeled, and appears to be very successful in reducing teen pregnancies.

Expected Findings/Results:

The main goals of the DH Pregnancy Prevention and Abstinence Education Program are to reduce the rate of births to Denver teenagers, aged 15-17 and to reduce the proportion of adolescents in grades 9 who report having engaged in sexual intercourse.

Evaluation measuring instruments include the results of pre- and post-testing to assess student ability to identify the risks of early sexual involvement and application of critical thinking skills; parent self-reports on promoting and encouraging abstinence; and positive results mapping scores due to case manager interventions.

PROJECT SUMMARY APH 000407

Agency: Polk County Department of Education
Drawer A
Benton, TN 37307

Project Director: Louetta Moats

Phone Number: (423) 338-4508

Evaluator: Lloyd Davis

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

The Polk County School System is located in a rural southeast corner of Tennessee bordering North Carolina and Georgia. This AFL project consists of a locally developed abstinence curriculum directed at all students in grades 6-9 emphasizing the social, psychological and health gains to be realized by abstaining from sexual activity. The Family Life Curriculum incorporates the Tennessee State curriculum with other abstinence curricula materials and information found in a community survey.

In addition to the school-based abstinence education, a club called "SoulMates" is implemented in all schools with sixth grade girls. This club uses resource materials to present lessons on abstinence, developing life goals, developing career goals and other topics such as friendship, love, self-respect and coping with mistakes.

Focus of the Demonstration:

This project primarily targets students ages 11-14, in grades 6-9. Project activities include working with both males and females in school and with their parents through newsletters and actual training programs.

The focus of the program is twofold. The first point of focus is to provide and promote abstinence

education which will serve to prevent pregnancies and the transmission of STDs. The second point of focus is to teach and promote communication skills between parents and their children when discussing topics such as goal setting, expectations, sexual involvement and abstinence, along with other subjects.

The main goals of the project are: (1) postpone sexual involvement; and (2) reduce the number of out-of-wedlock pregnancies.

The specific objectives are: (1) to reduce the number of unwanted/out-of-wedlock pregnancies in teenagers in Polk County; (2) to provide skills for students to use to resist peer pressure; and (3) to provide students with the skills and the knowledge to decide against premarital sexual activity.

Expected Findings/Results:

The results of this program will be steps toward the following: (1) lower pregnancy rates among teenagers; (2) increased self-esteem; (3) increased academic success; (4) decreased drop-out rate due to child-bearing; and (5) decreased number of pregnant girls on homebound education.

PROJECT SUMMARY APH 000408

Agency: The Boys and Girls Club of Superior
710 Catlin Avenue
Superior, WI 54873

Project Director: Rosemary Capocci, Ph.D.

Phone Number: (715) 378-2106

Evaluator: Fariba Pendleton, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Boys & Girls Club of Superior is a non-profit youth guidance organization dedicated to promoting health, social, educational, vocational, cultural, character, and leadership development. This AFL project will use the SMART Moves curriculum, a unique national prevention curriculum developed by the Greater Boys and Girls Clubs of America. Smart Moves promotes abstinence from substance abuse and sexual involvement through responsible behavior. The program is based on a resistance training/social skills model. Using small group activities, it teaches young people to recognize and resist media influences and peer pressures to engage in alcohol and other drug use, and early sexual involvement.

Focus of the Demonstration:

The SMART Moves program is divided into three sections: SMART Moves 1 for participating children ages 9-12, SMART Moves 2 for participating children ages 13-16, and Keep SMART for the parents of participants.

SMART Moves 1 is a resistance skills program that focuses on ways to identify and resist peer, social and media pressures to become sexually involved. It includes sessions related to the onset of puberty and to friendships.

SMART Moves 2 is a social skills program for adolescents that teaches resistance skills that are needed to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances. Also taught are stress reduction techniques, communication skills, assertiveness training and life planning. It teaches that sexual abstinence is the only certain way to avoid out-of-wedlock pregnancy and other harmful psychological and physical effects for both the individual and the child.

Keep SMART is a program for parents that emphasizes communication skills, parenting skills, conflict resolution skills, and factual information about adolescent sexuality and the dangers posed by drug/alcohol use.

The objective of the SMART Moves program in relation to pre-teen and teen sexual involvement is to prevent the onset of sexual involvement until marriage. This will be accomplished by: (1) increasing participants' knowledge about sexuality; (2) increasing communication among staff members, parents, guardians, and Club members regarding adolescent sexual involvement; (3) helping pre-teens and teens identify and resist peer and media pressures to understand the physical and social changes taking place in their lives; and (4) helping pre-teens and teens develop and improve skills around making decisions, resisting social and peer pressures, and coping with the stress of growing up.

Expected Findings/Results:

Through the three listed components, the participating youth will be involved in small group prevention activities; 45 parents will participate; all youth ages 8-16 living in Superior, Wisconsin will have the opportunity to participate in the SMART Moves program and community activities.

PROJECT SUMMARY APH 000409

Agency: Michigan Neighborhood Partnership
Youth and Family Development
3011 W. Grand Blvd., Suite 405
Detroit, MI 48202

Project Director: Charlene Johnson

Phone Number: (313) 872-3327, Ext. 14

Evaluator: Lorraine Guterrez, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Michigan Neighborhood Partnership (MNP) is a non-profit, urban, community collaboration agency that provides a variety of services to various communities in the Detroit area. The collaboration itself is made up of neighborhood organizations, universities, local governments, and other businesses that all provide technical assistance to non-profits in the cities of Detroit and Dearborn.

Focus of the Demonstration:

This project uses the Families United to Prevent Teen Pregnancy (FUPTP) curriculum. The curriculum covers twelve essential areas dealing with values as the basis for self esteem, decision making, goal setting, relationship development, sexuality, etc. The curriculum is implemented in ten neighborhood sites after school once a week with youth ages 9-15 years old as the target population. The abstinence education sessions are facilitated by supervised and trained teen mentors and implemented in group settings. Parents of the participating students are encouraged to attend a support group that meets once a month to engage in discussion about strengthening family relationships and teaching decision-making skills and goal-setting strategies in their homes.

Weekly meetings involve abstinence specialists, youth and teen mentors from each site. Information

is shared in a large group setting. In order to promote an environment conducive to discussing sensitive issues, the project works with smaller groups which would be homogenous with respect to age and gender. Monthly meetings involve each of site director, abstinence coordinator, specialists and parents/care givers. Guest speakers, films, videos, role plays, etc. will be a part of the methodology where applicable in both groups. A special year-end event aimed at raising the awareness of abstinence is planned by the youth from participating organizations and involving other community abstinence advocates.

This project has six main objectives: (1) to increase the number of risk-reducing assets among low income youth in Detroit and Dearborn; (2) to provide young people with knowledge and skills that will instill healthy attitudes and will encourage and support abstinence from sexual activity; (3) to strengthen the role of parents and other adult family members in promoting abstinence; (4) to provide youth support through peer mentoring; (5) to increase collaboration between community organizations, schools, and other youth-serving organizations in the cities of Detroit and Dearborn; and (6) to develop a collaborative model of sexual abstinence education programs.

Expected Findings/Results:

Participants are selected from among each participating site's current program clientele. The selected youth demonstrate three or more "high risk" factors, and agree to participate in the program activities. Pre- and post-tests are used to evaluate the attitudes towards sex of participating and non-participating teens (of same age and gender).

For evaluation analysis, among the participating youth: (1) there will be a 50% increase in the number of assets from pre-test to post-test and each youth will be able to name one significant role model at the end of the grant year; (2) 75% of the youth will be able to discuss a realistic strategy for abstaining from sexual activity; (3) 30% of families will attend parent involvement groups and will be able to understand the concepts presented; (4) by the end of the project period, teen mentors will be able to provide information, support, and referrals; and (5) neighborhood organizations will demonstrate new linkages, and sources of prevention information in the community.

PROJECT SUMMARY APH 000410

Agency: Northridge Hospital Medical Center
18300 Roscoe Blvd.
Northridge, CA 91328

Project Director: Janet Rejkowski, RNC, BS

Phone Number: (818) 885-5341

Evaluator: Carl A. Maida, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Pregnancy Abstinence for pre-Teen Hispanics (PATH) project outreaches to pre-teens in low-to-moderate income Hispanic neighborhoods in the central San Fernando Valley of Los Angeles County. Northridge is a community hospital that has targeted young people through established outpatient and community service linkages throughout the local high schools and middle schools. The project uses four peer focused interventions targeting youth from grade five through eight. The interventions include: same sex after school workshops emphasizing sexual abstinence and life/career options, dating and self-esteem; health fairs at shopping malls and parks oriented to young teens; peer counseling; and peer mentoring.

Focus of the Demonstration:

The PATH project tests the efficacy of a school-based sexual abstinence intervention initiated and facilitated by peer health educators. The intervention is based on the assumption that youth listen to the counsel and action of older peers. The Managing Pressures Before Marriage curriculum is implemented in five sessions in local middle schools. The peer facilitators and program staff conduct health fairs at community venues in order to educate the community at large and to recruit participants. These peer health educators are available to mentor youth and to reinforce the abstinence message outside of the classroom.

Expected Findings/Results:

This program seeks to demonstrate an increase in participant knowledge in the areas of sexual abstinence, life/career options, dating and self-esteem. Using “respected” peers to implement the program, the barriers to health education messages will be reduced and participants will change their attitudes pertaining to sexuality. The project seeks to demonstrate the effectiveness of a community intervention initiated by a community hospital in collaboration with public school and community-based organizations.

A quasi-experimental design is being used to study the effectiveness of peer support as an independent variable on change in premarital sexual practices. The project works in conjunction with the author of Managing Pressures Before Marriage, Dr. Marion Howard, to act as a pilot site for a new pre-, post-test instrument.

PROJECT SUMMARY APH 000411

Agency: Covenant Health Agency
Teenage Pregnancy Prevention Program
12655 E. Lee Highway
Lenore City, TN 37771

Project Director: Paige Wilson-Williams

Phone Number: (423) 458-0839

Evaluator: Delores Smith, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School -based

Project Start Date: October 1, 1997

Program Description:

The Loudon County Health Improvement Council, "Break the Cycle" and Covenant Health agencies provide sponsorship for "Break the Cycle" a teenage pregnancy prevention program, while identifying community-based health issues and creating task forces to generate solutions, develop interventions, and implement and evaluate programs. The AFL Abstinence Education Demonstration Project provides expansion of the current "Break the Cycle" program and implements the "We're Abstinent and Informative Teenagers (WAIT) program.

Focus of the Demonstration:

The project focuses on bringing an abstinence only message to 5th - 9th grade students, through recruiting and training 10th - 12th grade students presenters that share their personal testimonies on why they have chosen to abstain from sex until marriage. The student presenters also are equipped to answer any questions on STDs, including HIV and AIDS. These peer educators are extensively trained, paid for their presentations, and reimbursed for their travel expenses to the presentations. This group participation can be compared to student/part-time employment. In addition, the peer educators must maintain a C+ or greater grade point average, and present to other groups no more than two times each month.

In addition to the Sex Can Wait curriculum, the "Break the Cycle" program will utilize "Baby Think it Over" infant simulators, "Empathy Belly" pregnancy simulators, and other curriculum materials to increase and strengthen methods of adolescent health education all designed to further efforts of adolescent pregnancy prevention.

The project has an overall goal to reduce the rates of teenage pregnancy and to build and further establish good decision-making and life skills. The achievement of this goal will be directly related to the efforts of the AFL Abstinence Education Demonstration Project and "Break the Cycle."

Expected Findings/Results:

The objectives of the evaluation are to: (1) assess the effectiveness of the peer education program on peer educators' decisions to postpone sexual involvement until marriage; (2) examine the effect of the training and presentation experiences on the peer educators' decision to continue to practice abstinence; (3) to assess the effectiveness of the vocational preparation of the peer educators regarding their long term goals (college, work); and (4) to determine the effectiveness of the overall program in student's decision to abstain from sexual activity and hence prevent STDs and pregnancy.

It is anticipated teenage pregnancy and STD infections among young people in Loudon County will be substantially reduced. Therefore, it is hoped that peer educators will serve as positive role models for young peers; and these younger peers will model the behavior and attitudes (regarding abstinence) of the peer educators. Further, it is anticipated the experience will help to enhance peer educator's sense of competence and self-worth; and that will increase younger peers sense of worthiness and understand the long term benefits of remaining sexually abstinent until marriage.

PROJECT SUMMARY APH 000412

Agency: Wake County Human Services
Community Services
10 Sunnybrook Road
P.O. Box 14049
Raleigh, NC 27620

Project Director: Lechelle W. Wardell

Phone Number: (919) 250-4554

Evaluator: Craig C. Brookins, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Wake County Human Services agency provides public health, mental health and social services to all communities in Wake County, North Carolina. The AFL Abstinence Education Demonstration Project provides adolescent male pregnancy prevention programming to 9 - 14 year old males and their families living in Wendell, North Carolina.

Focus of the Demonstration:

The goal of the Brothers to Brother II Project is to promote positive personal growth, academic excellence, abstinence and responsible sexual behaviors in young minority males. In order to accomplish this goal, comprehensive strategies are implemented that address the problem in schools, neighborhoods, service agencies and families.

The Brothers to Brother II project strives to promote abstinence as the best method of pregnancy prevention by enhancing the cultural-esteem and self-image of the participants. The project staff assists the participants in setting educational career goals, and build communication skills between the student participants and their parents/care-givers.

The Project uses peer mentors to disseminate valuable family life information to 100 male adolescent participants in the program. The peer mentors are trained at least 30 hours in Health Education (including abstinence education) before they can begin sharing this information with their younger peers. In addition, the participants in the program are matched with African American adult role models to help guide their personal and social growth and development. Brothers to Brother II provides a comprehensive intervention that includes education and training, job seeking skills, family life education, life management skills training, peer counseling, and male responsibility counseling.

Expected Findings/Results:

The evaluation design for Brothers to Brother II includes the collection and analysis of process, outcome and archival data utilizing both quantitative and qualitative methodologies. Data is collected from program participants, volunteers, paid staff, collaborating agencies and the general community.

The following changes and maintenance of behavior are anticipated with Project participants over the course of the program:

- ▶ maintenance of abstinent behavior, including sexual activity and drug use, or delay of onset of sexual behavior and drug use in those participants who are currently abstinent
- ▶ reduction in sexual behavior for participants already sexually active or using drugs
- ▶ adoption and maintenance of protective behaviors for those sexually active and choosing to remain so
- ▶ reduction in the number of pregnancies fathered by the participants
- ▶ maintenance of or increase in the number of participants matriculating in work and school settings.
- ▶ decrease in criminal activity
- ▶ increase in community participation and community satisfaction with the program and its success in addressing identified problems
- ▶ increase in the overall and domain specific levels of self-concept (academic, family, peers, individual) and ethnic identity development

PROJECT SUMMARY APH 000413

Agency: Alum Rock Counseling Center, Inc.
1245 E. Santa Clara Street
San Jose, CA 95116

Project Director: Rosalinda Rodriguez

Phone Number: (408) 294-0500, Ext. 20

Evaluator: Dinese Hunter-Gamble, M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

Alum Rock Counseling Center (ARCC) is a 24 year old non-profit agency providing prevention, intervention, and treatment of services in the City of San Jose. The ARCC's Girls Smart Choice Program target population is comprised of South East Asian and Latino 8-14 year old girls. Project activities include: (1) after school groups for education and social behavioral programming, utilizing interventions that combine activities shown to have promise for motivating youth to postpone sexual activity; (2) guided volunteer activities- including mentoring, tutoring and service projects; (3) needs assessment, information and referral; and (4) parent involvement through home visits and other activities.

Focus of Demonstration:

The four major goals of the program are: (1) to encourage abstinence, decrease unwanted teen pregnancies and facilitate healthy attitudes and behavior through age-appropriate education and decision-making skills; (2) to increase the ability of "Girls Smart Choice" Program participants to receive "necessary services" supporting abstinence and healthy lifestyles; (3) support the role of parents and other adult care givers in encouraging participants' abstinence and healthy lifestyles; and (4) provide an evaluation of the "Girls Smart Choice" Program.

Initially, staff recruitment and training takes place followed by a series of introductory activities at

each school. Introductory activities include: teacher-faculty orientations, distribution of public information flyers, and school assemblies. Program staff host enrollment information sessions for interested girls after each school assembly. Following these sessions, intake and assessment interviews are to be scheduled.

Through the After School Group activities, participants receive abstinence education, and become aware of how the information applies to their lives. The groups are held twice a week from 2:30 to 5:00 p.m. One session focuses on education and skill building through the Sex Can Wait curriculum. The second session focuses on applying the information and skills through mentorship, tutoring and service. The participating girls are required to keep a portfolio and journal to provide a means of recording their own personal growth experiences within the program.

Expected Findings/Results:

The goal in conducting this evaluation is to document the activities and outcomes associated with the implementation of the "Girls Smart Choice" Program, and to learn as much as possible about the impact of the program on attitudes and behaviors related to abstinence and the adoption of a healthy lifestyle for the middle school-aged girls who participate.

Through intake and assessment interviews, baseline demographic data is collected on each girl, identify needs that may be met outside the program. A pre-test or assessment survey is administered to collect data on attitudes and behaviors related to sexuality. The areas to be explored include: peer pressure, problem solving, decision making, making realistic goals and achieving them, the awareness of how substance abuse affects thinking and decision making abilities, developing positive study habits, exploration and development of self-identify, relationships with others - including parents, teachers and other adolescents (males and females), dynamics of and ways to develop healthy relationships.

A sample of the girls who elect not to fully participate in the program is selected as a comparison group. This group also participates in the pre- and post-survey. The program expects that at least 75% of the girls in the intervention group will receive at least 75% of the curriculum-based education, and participate in at least 40 hours of volunteer community service. It is anticipated that at post-test, at least 83% of these girls in the intervention group will demonstrate increased information and knowledge about abstinence and related topics; show an increase in positive change in attitude related to abstinence and delaying sexual activity. Finally, it is anticipated that at least 50% of those girls in the intervention groups will report maintaining sexual abstinence or delaying sexual activity.

PROJECT SUMMARY APH 000414

Agency: South Carolina Department of Health and
Environmental Control
Pee Dee Health District
145 E. Cheves Street
Florence, SC 29506

Project Director: Kim Heger

Phone Number: (803) 661-4830

Evaluator: Joel D. Philip, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

The Pee Dee Health District is a regional division of the South Carolina Department of Health and Environmental Control. The mission of the agency is to promote and protect the health of the public and the environment by mobilizing communities in health initiatives, implementing health policies, and providing direct health services to specific populations. The AFL demonstration project promotes teen abstinence through direct school-based instruction and through a television media campaign. The project targets male and female school students, ages 10-19, drawn from a predominantly rural, low-income region of South Carolina.

Focus of the Demonstration:

The overarching goal of the program is to reduce the teen pregnancy rate by teaching teens how to resist pressures to engage in sexual intercourse within a social and community climate that encourages abstinence. This goal will be achieved by implementing the Managing Pressures Before Marriage curriculum in participating middle schools and by reinforcing the message of abstinence through a media campaign.

This two-pronged approach is based on the social inoculation model which states that high risk

behaviors such as early sexual involvement stem, in part, from both societal and peer influences. Young adolescents can be “immunized” from these pressures by exposing them to older teen leaders who are trained to help them identify and react appropriately to sexual pressures. Once learned, these skills can then be practiced and reinforced within a community atmosphere that encourages abstinence. This gives young teens the tools to resist coercive sexual advances and the socio-cultural support that enables them to feel good about delaying their sexual initiation. The underlying assumption is that a reduction in the rate of sexual intercourse will also reduce pregnancy rates.

With this overarching goal in mind, the following six implementation goals become the focus of the demonstration: (1) to enlist the support of area school districts to help promote the message of abstinence; (2) to train secondary school teen leaders in the Managing Pressures Before Marriage curriculum; (3) to teach the curriculum to middle school students; (4) to collaborate with community-based agencies; (5) to deliver television Public Service Announcements to the catchment area; and (6) to coordinate the development of an abstinence newsletter to teens from teens.

Expected Findings/Results:

The project staff intends to conduct interviews with key personnel and review records to document the project's fidelity to the six implementation goals. Feeding these results back into the program will help refine these goals for future funding.

The outcome evaluation uses a quasi-experimental design to assess differences between participants and non-participants in their intention and their ability to delay the initiation of sexual activity. Participants from intact 7th grade classrooms are assessed at baseline, post-intervention, and at a nine month follow-up.

PROJECT SUMMARY APH 000415

Agency: ETR Associates
P.O. Box 1830
Santa Cruz, CA 95061-1830

Project Director: Nancy Abbey

Phone Number: (408) 438-4060

Evaluator: Nancy Frank, M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

ETR Associates is a private, non-profit health education promotion organization serving schools and communities throughout the United States and reaching several countries internationally with its publications, training, and technical assistance. This AFL Abstinence Education Demonstration Project has developed an abstinence curriculum targeted to seventh grade students in three different geographic and ethnic school districts in California. Oakland/Alameda County is a large urban city; Pajaro is a very rural, agricultural area; and San Lorenzo Valley is a mountainous commuter community. This new curriculum has been written for use in school or community-based abstinence education programs.

Focus of the Demonstration:

The project has four objectives: (1) to develop and make available, an 8-10 lesson abstinence curriculum for seventh graders; (2) to establish a teen advisory panel of 14-15 year old adolescents who will meet at least 8 times to provide ongoing input into the development of the abstinence curriculum; (3) to pilot test the curriculum with middle school youth in three California communities with significant populations of high risk adolescents; and (4) to establish a parent-community advisory panel to assist in developing strategies to involve parents and community-based youth serving agencies in promoting abstinence as the best choice for young teens.

The goal of the project is to increase the intention to delay sexual activity among all 11-13 year old students with an emphasis on low income, high risk teens. The project has a strong focus on involving youth in the development of the curriculum. A committee of high school youth from three communities in California assist in the conceptualization of the curriculum outline, review draft materials, participate in pilot lessons from the curriculum and advise on the final product. The make-up of the committee reflects diversity in gender, ethnicity, socio-economic status, and a mix of rural, urban and small town.

In addition, the project incorporates suggested strategies for involving parents and community in support of the abstinence message for youth. An advisory committee of parents and community members works with project staff to advise on the most effective ways to enlist this active support. The committee critiques parent homework assignments and advises on suggested parent education sessions. Community members develop tips for promoting an abstinence message within the community based programs. The curriculum reaches pre-adolescent males and females.

Expected Findings/Results:

The evaluation hypothesis is that an age appropriate, culturally relevant, participatory curriculum for 7th graders focusing on abstinence from sexual activity will lead to an increase in intent to remain abstinent during the school years. There is also an expected increase in knowledge, skills and self-efficacy to negotiate or facilitate postponing sexual activity.

A pre/post test has been designed for this evaluation. The test uses close-ended questions using a range of yes/no, multiple choice and Likert scales to determine baseline and post-education knowledge, skills, attitudes and perceived self-efficiency to achieve postponement.

The project processes will be monitored by: (1) a narrative description of the process of recruitment and involvement of the Teen Advisory Committee; (2) pilot testing of the lessons; (3) review of the curriculum by professional educators; and (4) documentation of the Parent/Community meeting.

PROJECT SUMMARY APH 000416

Agency: University of Miami School of Medicine
Department of Epidemiology and Public Health
P.O. Box 016069 (R-669)
1801 NW 9th Avenue
Miami, FL 33101

Project Director: Onelia Lage, M.D.

Phone Number: (305) 243-6759

Evaluator: Robert Tamer, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Hospital-Based

Project Start Date: October 1, 1997

Program Description:

The Multimedia Approach to Pregnancy Prevention (MAPP) Program attempts to strengthen the intention of 9-14 year old youths treated for chronic illness to postpone sexual initiation and to prevent pregnancy through sexual abstinence. Intervention sessions and data collection take place in the University of Miami Jackson/Children's Hospital using portable computers. The project uses the Managing Pressures Before Marriage curriculum.

Focus of the Demonstration:

The overall goal of the project is to strengthen intentions to postpone sexual initiation (and prevent pregnancy) using a multimedia computerized approach with a curriculum that is abstinence based and specified to the primary chronic disease that 9-14 year aged youths are treated for in both inpatient and outpatient clinics.

The objectives are: (1) to compare the knowledge, attitudes and intentions about sexual abstinence in youths who receive the MAPP Program; (2) to develop 3 multimedia computerized modules focused on pregnancy prevention through sexual abstinence that will be delivered in 2 clinic visits; and (3) to increase parental support and communication for sexual development and behaviors of chronically ill youth.

Adolescents who attend the Children's Medical Services Clinic and two Adolescent Medicine Clinics at the University of Miami Jackson/Children's Hospital for treatment of diabetes, sickle cell anemia, asthma or congenital heart disease are randomly assigned to either a MAPP or Standard Care (SC) group. Eligibility criteria include having been diagnosed with a chronic illness for at least 6 months; the ability to read and understand English; and, a willingness to attend two consecutive monthly scheduled appointments.

Once eligible youths and their parents sign consent forms, a user ID number and password allows the participating youth to log onto the computer and to key in to the specific diagnosis that he or she is being treated for at the clinic. Both MAPP and SC youth complete pre- and post-questionnaires via computer to assess knowledge, attitude and intentions to remain abstinent.

The MAPP participants complete 3 program modules during two clinic visits. The topics developed in the 3 modules include: (1) "Learning About My Chronic Disease And How It Impacts Sexual Development and Pregnancy;" (2) "Decision Making, Communication, And Drug and Alcohol Effects on Sexual Decision Making;" and, (3) "Relationships, Setting Limits, Stopping Points, and Communicating With Parents and Clinicians."

At the end of the visit, the participants take handouts from a rack placed in the waiting room. They are instructed to complete a checklist to give to their physician during the patient visit. They are asked if they have additional questions about the information presented in the modules and if they would like to join a group of peers to discuss health and issues around relationships and pregnancy prevention.

Expected Findings/Results:

The project delivers the MAPP Program modules to targeted youths and anticipates that youths in the MAPP Intervention group will: (1) increase knowledge about sexual development and their illness, and the social and health gains that they receive from sexual abstinence outside of marriage; (2) increase attitudes and behavioral intentions to remain sexually abstinent outside faithful monogamous relationships in the context of marriage in the MAPP group from pre to post test that are greater than the pre to post test change observed in the SC group; and (3) increase communication for MAPP group youths with parents and/or clinicians about sexual development and their illness to a greater extent than youths in the SC control group.

PROJECT SUMMARY APH 000417

Agency: Northwest Family Services
4805 NE Glisan Street
Portland, OR 97213

Project Director: Rose Fuller

Phone Number: (503) 215-6377

Evaluator: George M. Sugai, Ph.D., M.Ed.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

The Northwest Family Services (NWFS) agency provides family educational programs to schools, community groups, families, and individuals. The AFL Abstinence Education Demonstration Project entitled “Youth Solutions” is a prevention project targeting students aged 12 to 15 year old youth in Oregon schools. It includes three levels of abstinence intervention: an abstinence peer enacted drama called “Promises”, the FACTS curriculum (a 10 to 15 lesson abstinence), and a peer-mentor led abstinence-based media project (e.g., Public Service Announcements, CD-ROM, and posters).

Fifteen schools are participating in one of the three levels of intervention. NWFS provides “Promises” to school assemblies, in service the faculty on the use of the FACTS curriculum, and develop the media project, and train the peer mentors. The school faculty implements the FACTS curriculum and high school students implement the media project with the middle school students.

Focus of the Demonstration:

The project has five objectives: (1) train teachers and counselors in proven techniques to reinforce teen abstinence; (2) decrease transition rates to teen sexual activity through an educational and peer support model; (3) compare three levels of intervention to determine the impact of each compared to the other as well as to a comparison group without intervention; (4) increase community support for teen abstinence through parent education seminars and local radio public service announcements produced by the teens; and (5) develop and improve abstinence support materials, including a peer mentor component to complement the FACTS curriculum, an abstinence information CD-ROM for a school Intranet, as well as posters and public service announcements.

The major focus of the project is with male and female adolescents in middle school and early high school for the purpose of promoting abstinence.

Expected Findings/Results:

The project is evaluating four different groups or levels of interventions: (1) the “Promise” drama alone; (2) the “Promises” drama plus the FACTS curriculum; (3) the “Promises” drama plus the FACTS curriculum plus Peer Mentoring; and (4) comparison group. Each level participates in a pre/post intervention survey. The evaluation measures knowledge and attitude changes associated with the intervention. It is expected that the greatest intervention (Level 3) will result in the greatest change in attitude.

Specifically, the expected results will be that participation in Levels 2 or 3 (but not Levels 1 or 4) will have a statistically significant relationship with an increase in (a) parent-teen communication about human sexuality, (b) perceived ability to resolve interpersonal conflicts, (c) awareness of the consequences of early sexual activity for future goals, (d) values favoring sexual abstinence, (e) the age of initiation of sexual activity, and (f) the percent of students in the group who, although they had sexual intercourse at some time in the past, have not recently and/or now intend to abstain from premarital intercourse. It is anticipated that Level 3 may be more effective than Level 2 in achieving all program objectives.

PROJECT SUMMARY APH 000418

Agency: University of Maryland School of Medicine
Department of Family Medicine
29 S. Paca Street
Baltimore, MD 21201

Project Director: Verlyn O. F. Warrington, M.D.

Phone Number: (410) 328-2550

Evaluator: Jeanette L. Johnson, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and Clinic-Based

Project Start Date: October 1, 1997

Program Description:

The University of Maryland School of Medicine - Department of Family Medicine provides primary health care services to a predominantly African American inner city population. The AFL Abstinence Education Demonstration Project provides a primary prevention sex education program to males and females ages 9 - 14 years enrolled in the Family Medicine Practice. In addition, parenting skills are taught to their parents by a clinical psychologist. The Sex Can Wait curriculum is taught by health educators well versed in the area of Family Medicine. Concepts taught are reinforced by trained mentors. The program involves didactic sessions as well as experiential and creative expression through dance and drama.

Focus of the Demonstration:

The program has the following goals: to educate pre-/young adolescents about the physical and developmental tasks of adolescence, the societal, emotional and health consequences of early sexual activity; to provide pre-/young adolescents with the knowledge and skills to choose and maintain abstinence as a viable option; and to educate pre-/young adolescents about inappropriate sexual contact and risky behaviors. The program also aims to provide parents with the appropriate parenting skills to support their children in their commitment to abstinence.

The objectives are accomplished through a series of didactic sessions, small group discussion, experiential role play and creative expression. The goals are reinforced through use of mentors. The project focuses on both male and female pre-/young adolescents who have not yet initiated sexual activity, and their parents in order to promote abstinence as a viable and desirable lifestyle and avoid pitfalls of early sexual activity.

The project uses different curriculum materials for implementing the project. A modified version of the Sex Can Wait curriculum is presented to the pre-/young adolescents. Pathways to Parenting is a curriculum aimed at equipping parents with the skills to present abstinence as a choice and help them to support their children's commitment to delaying sexual activity. Pathways to Parenting addresses issues pertinent to urban parents, in a culturally competent manner. This six module curriculum includes sessions on effective parenting, single parenting, cultural effects on parenting practices, adolescent development including sexuality and abstinence.

Expected Findings/Results:

The project intends to serve pre-/young adolescents randomly selected from the clinic population. The ratio of males and females in the practice are almost equal so it is expected that approximately 50% will be female. About 65% are African American. At least one parent/guardian per child is expected to attend.

A randomized evaluation component uses pre- and post test assessments as well as 12 month follow-up. This process evaluates the effectiveness of the program in preventing onset of sexual activity. It is anticipated that the project will show an increase in abstinence, self esteem, communication between parents and children, and decreases in pregnancy, sexually transmitted diseases and school drop out when compared to a control group.

PROJECT SUMMARY APH 000419

Agency: Teenage Parent Council of Austin, Inc.
8000 Centre Park Drive, Suite 370
Austin, TX 78754

Project Director: Amy D. Benton, LMSW

Phone Number: (512) 837-6197

Evaluator: Cindy Roberts-Gray, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

The Teenage Parent Council of Austin, Inc. (TPC) is a private non-profit community agency that has provided education and advocacy in Travis County since 1970. TPC provides programs to address the prevention of teenage pregnancy and to facilitate and provide essential services to pregnant and parenting teens and their families in Austin/Travis County. This school-based AFL project provides curriculum guided prevention education groups to children ages 9 - 14. The program utilizes professional group facilitators and peer educators. The project serves urban, suburban, and rural communities.

Focus of the Demonstration:

The project has 6 objectives: (1) to increase knowledge about sexual health; (2) to increase capabilities for talking with their families about sexual health; (3) to develop skills to resist pressures toward too early sexual involvement; (4) to develop a "consensus" favoring postponement of sexual involvement; (5) to increase intentions to delay becoming sexually active; and (6) to increase abstinence from sexual activity.

The project focuses on adolescent/pre-adolescent males and females for the purposes of promoting abstinence and preventing early sexual involvement, pregnancy and parenting. The project also has a component to provide education to parents to increase dialogue within families on avoiding too early sexual involvement. The project uses the Managing Pressures Before Marriage curriculum.

Expected Findings/Results:

The evaluation will be conducted in three parts:

1. Criterion-referenced process evaluation will use enrollment forms, activity logs, and key informant interviews to track and help guide curriculum implementation and reach to the target population. Reports for this part of the evaluation will be submitted at monthly meetings of the programs's Advisory Committee.
2. Treatment-comparison group evaluation will use pre- and post tests and questionnaires to measure and compare the immediate outcomes of curriculum guided groups facilitated by program staff with outcomes achieved in groups that have a peer educator. Report of results for this part of the evaluation is the primary product for the initial year of this project.
3. Longitudinal evaluation of behavioral outcomes for participants in the treatment, comparison, and "no intervention" groups is planned for future years, and will be triggered when the young person reaches age 14.

PROJECT SUMMARY APH 000420

Agency: Starkville School District
Family-Centered Programs
401 Greensboro Street
Starkville, MS 39759

Project Director: Joan Butler, Ed.D.

Phone Number: (601) 324-4063

Evaluator: Dwight Hare, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Starkville School District's Family-Centered Programs (FCP), located in rural northeast Mississippi, provides educational services to families in the community through the school district. "Project GOALS" is a school-based abstinence education project which delivers the Sex Can Wait curriculum to 4th - 8th grade students. Within the project, 6th, 7th, and 8th grade students also use infant simulators ("Baby Think It Over").

The FCP has demonstrated success and is recognized by the community and state as a model program. FCP is a relatively new approach which involves working with families in the community through the school district serving the entire Oktibbeha County.

Focus of the Demonstration:

The project strongly focuses on male and female pre-adolescents and adolescents and their families to promote abstinence and prevent pregnancies. Project GOALS provides a school-based pregnancy prevention demonstration program which employs the Social Learning Theory model focusing on a holistic approach. The program participants are students in grades 4 - 8 from Oktibbeha County. A facilitator is stationed in each school serving 4th - 8th graders.

Project GOALS' prevention model is a three-pronged approach combining home, school and community employing objectives to achieve our goal. The overall goal of the program is to reduce the incidences of teen sexual activity before marriage therefore resulting in a reduced number of unwed teen pregnancies by at least five percent in Oktibbeha County, Mississippi.

The project employs a staff consisting of a coordinator and five (5) facilitators who will organize, coordinate and implement the mentor/tutor program for at-risk children in grades 4 - 8 in the Starkville and Oktibbeha County School Districts. Staff members are trained in working with the curriculum, peer mediation, mentoring techniques, as well as receiving on-going professional training.

Students receive weekly one-on-one tutorial and mentoring sessions in math and/or language arts. Staff members conduct age-appropriate, one hour group sessions in school using the Sex Can Wait curriculum. Topic areas covered by the curriculum include: life-skills, health education, career choices, conflict resolution and decision making. Facilitators draw from supplemental materials for lessons such as the "Baby Think It Over" infant simulator and it's curriculum. All curriculum materials used encourage adolescents to abstain from sexual activity.

During the summer, Project GOALS' students will participate in a summer mentor/tutor program. Facilitators organize and implement weekly group sessions which are held in school facilities or other locations within the community. Students learn new skills and reinforce life skills lessons such as decision making and peer mediation. Additional activities include: crafts, music, sports and dance.

Parenting workshops for the families/parents of the Project GOALS students are designed to reduce the parents' discomfort with sharing material about sensitive subject matter with their children. The workshops approach abstinence from a family view as well as promote healthy living.

An Advisory Council for Project GOALS devises and develops cooperative working relationships with community and service area organizations, sharing program services and activities, to ensure the involvement of the community.

Expected Findings/Results:

Traditional quantitative measures are collected for students participating in the program. A statistical analysis is conducted to determine implications for program effectiveness. An equivalent group of students not participating is tracked and compared to the participating group.

PROJECT SUMMARY APH 000421

Agency: University of Iowa
College of Nursing
Iowa City, IA 52242-1121

Project Director: Perle Slavik Cowen, Ph.D., RN

Phone Number: (319) 335-7117

Evaluator: Frank J. Kahout, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The AFL pilot project “A Comparison of the Effectiveness of a Pregnancy Prevention Demonstration Project for Youth Aged 9 - 14 in Urban and Rural Settings” represents a collaborative effort involving the College of Nursing, University of Iowa, Buchanan County Volunteer Services, Buchanan County School District, Fayette County Parents Share and Support, Fayette County School District, and the Johnson County United Action for Youth.

The Managing Sexual Pressures Before Marriage abstinence curriculum for pre-teens and young teens serves as the program curriculum and is delivered by youth agency counselors. Human sexuality classes are provided by a nurse clinician. The general group consists of rural 7th and 8th grade students and their parents. Of the participating students, a high-risk group of siblings of pregnant or parenting teens, ages 9 to 14 is further targeted. This high-risk group and their families will receive the basic pregnancy prevention curriculum and enhanced program interventions at the community youth agencies. The program sessions are completed within 10 classes for youth and 5 for parents. High-risk youth and their families may also access counseling, parent education programs, agency referrals and transportation to classes through the youth agencies.

Focus of the Demonstration:

The aim of this project is to determine if a pregnancy prevention program for rural and urban youth aged 9 to 14 will significantly impact youth knowledge of responsibility in human sexuality, youth attitudes and values of sexual abstinence, parent-child communication of responsible sexual behavior and youth delay of sexual behavior.

There are 3 main objectives for implementing this project: (1) to provide an education module within the school curriculum for 7th and 8th grade students and their parents which addresses issues surrounding sexual decision-making and abstinence; (2) to provide an expanded education module within youth agencies for high-risk youth and their families which addresses issues surrounding sexual decision-making and abstinence; and (3) to provide enhanced support interventions to high-risk youth and their families which enables them to address family problems which may be providing barriers to abstinence values by their children.

Expected Findings/Results:

It is expected that the preventive interventions for youth aged 9 to 14 will assist them to increase their knowledge of human sexuality, empower attitudes and values of sexual abstinence, improve parent-child communication of responsible sexual behavior, decrease youth sexual behavior and decrease youth pregnancy rate.

The design is a longitudinal pre-test/post-test study and includes measurement of the effect of the intervention program for youth and their parents (independent variable) on youth knowledge of human sexuality, youth attitudes and values of sexual abstinence, parent-child communication of responsible sexual behavior, youth sexual behavior and youth pregnancy rate (dependent variables) with comparisons made between intervention and control groups in mid-western rural and urban samples. The parents of high-risk youth who received additional support interventions will also complete pre-/post "Parenting Stress Indexes" (Abidin, 1990), and "Adult-Adolescent Parenting Inventories" (Bavolek, 1984). Data analysis will focus on descriptive statistics that index the magnitude of program effects and the strength and direction of relationships. Core data sets will be programmed consistent with recommendations of the Teen Pregnancy Programs Computerized Information System (TPPCIS).

PROJECT SUMMARY APH 000422

Agency: Health and Hospital Corporation of Marion County
3838 North Rural Street
Indianapolis, IN 46205

Project Director: Jarnell Burks-Craig

Phone Number: (317) 541-2322

Evaluator: David R. Black, Ph.D., M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Pregnancy & Life Skills Program administered by the Marion County Health Department (MCHD) has created and sustained a comprehensive pregnancy prevention program that will lead to a reduction in adolescent pregnancy, decrease recurring pregnancy and increase knowledge of sexually transmitted infections. The MCHD project supplements existing services in urban community settings with curriculum based education that targets middle and high school minority and disadvantaged adolescents. This intervention enhances existing programs through the implementation of prevention-centered materials that feature a “Baby Think It Over” component, as well as the Sex Can Wait and Managing Pressures Before Marriage curriculums. The project provides activities intended to promote male responsibility, develop sexual awareness, increase the parent’s comfort level, and teach healthy attitudes about hygiene, anatomy, and physiology.

Focus of the Demonstration:

The project has three objectives: (1) develop and implement a curriculum-based sex education and adolescent pregnancy prevention intervention; (2) promote and extend a male responsibility program called “For Men Only” that targets minority and disadvantaged males ages 9-19; and, (3) develop a training and instruction program for parents. This program responds to the concerns of parents by offering parents of enrolled students an opportunity to attend support groups and classes.

Expected Findings/Results:

The data obtained from both the quantitative and qualitative methods will be used to supplement, adjust, and improve the existing program structure and content as well as to assess the effects of the program. An open-ended questionnaire is used primarily to gauge the student's assessments of the program. This approach provides useful information for making mid-term adjustments to the program's structure. The focus groups are used to determine the students' perceptions of the program, and to assess their overall beliefs and attitudes regarding sexuality and pregnancy prevention. It is expected that this evaluation mechanism will provide valuable, substantive data that may reveal additional perspectives and information specific to adolescents in the Indianapolis area. Appropriate parametric and non-parametric statistical techniques also will be used to evaluate the efficacy of the program.

PROJECT SUMMARY APH 000423

Agency: Drew Child Development Corporation
Adolescent Information and Education
1770 East 118th Street
Los Angeles, CA 90059-2518

Project Director: Carl Highshaw

Phone Number: (213) 249-2950

Evaluator: Rehema Gray, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Drew Child Development Corporation (Drew CDC), formed in 1987, is a nationally recognized, non-profit organization devoted to the education and well-being of at-risk children, youth and parents in under-served areas of South Central Los Angeles. The focus of the Corporation is to create a prevention-based, comprehensive, coordinated and self-supporting community-based agency that has child and family centered goals. Services provided by Drew CDC include: early intervention programs for infants and toddlers who are born with developmental disabilities and/or considered at-risk for developmental delay; diagnosis and treatment of child abuse-- particularly, sexual abuse; child care services for children three months to six years of age; treatment of prenatally drug-exposed infants; family preservation services; foster care licensing and placement, prenatal education and primary prevention services in the areas of adolescent pregnancy; and sexually transmitted diseases (STDs), including HIV/AIDS.

The AFL Abstinence Education Demonstration Project uses the Managing Pressures Before Marriage curriculum for implementation. The project is designed to curtail the rates of young adolescents, ages 11 to 14 years old, who initiate sexual activity, thus decreasing the number of STDs and pregnancies experienced by them. The demonstration project targets adolescents attending local middle schools, participating in youth-focused programs, and parents.

Focus of the Demonstration:

This project has four major goals:

Goal 1: To aid young adolescents ages 11 to 14 in increasing their knowledge and skills regarding postponing sexual involvement. This is accomplished by hiring and training two health education assistants and five peer advocates to assist with implementation of the Managing Pressures Before Marriage (MPBM) curriculum.

Goal 2: To increase parent-child communication regarding reproductive health and issues of sexuality. A minimum number of parents or guardians of adolescents receive information, education and/or referrals regarding the AFL demonstration project, reproductive health, sexuality and family life issues.

Goal 3: To increase school awareness of issues related to postponing sexual involvement, reproductive health and family life issues. Project staff conduct at least three school-wide events, health fairs or sponsored contests all geared towards raising awareness in the schools.

Goal 4: To increase community awareness of issues related to postponing sexual involvement, reproductive health and family life issues. Project staff participate in at least three community-wide events to disseminate information regarding the project and postponing sexual involvement.

The project strongly focuses on providing services to pre-sexually active adolescents which are aimed at the postponement of sexual activity. The literature on effective teen pregnancy prevention suggests that a family approach to service delivery produces more beneficial results. Therefore, because Drew CDC believes that parents are the primary educators of sexuality, they make up a portion of the target population.

Expected Findings/Results:

The project demonstrates that the combined application of these strategies enhance protective factors and reduce risk factors among the target population. The project uses these strategies to fulfill service goal which are to: (1) cultivate responsible sexual behavior by increasing health education to adolescents; (2) reduce teen pregnancy by decreasing the numbers of young adolescents initiating sexual activity.

PROJECT SUMMARY APH 000424

Agency: Chicago Commons Association
Mary McDowell Settlement House
1335 W. 51st Street
Chicago, IL 60622

Project Director: Josephine Robinson

Phone Number: (773) 376-5242

Evaluator: Alice J. Dan, M.D., M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Chicago Commons Association is a human service organization offering programs that address a wide variety of social and community issues, including education and community development. The Adolescent Health Promotion Project provides education, one-on-one attention, positive activities, parental involvement and community commitment to adolescents. The project serves students between the ages of 9 and 15 years of age and their parents in a predominantly African-American neighborhood on the south-side of Chicago.

Focus of the Demonstration:

The overall goal of the project is to promote healthy lifestyle choices among male and female adolescents through education, individual attention, and support from families and the community. The Families United to Prevent Teen Pregnancy (FUPTP) curriculum is used in the AFL project. The project strives to promote healthy decision making skills for young people through intensified curriculum education in school and community settings. A community-wide Adolescent Health Promotion Council supports the development of the project and to work towards its continuation.

The Adolescent Health Promotion Project has four objectives: (1) to organize a council of community residents, parents, and youth to support the development of the program and to work toward its continuation; (2) to provide medically accurate education and materials to 500 young people between the ages of 9 and 15 that promote healthy choices about sexuality and build upon the values of respect, self control, responsibility, honesty, social justice, equality and keeping promises; (3) to work with young people and their families to provide activities that reinforce positive choices and build on positive communication about sexuality and health issues; and (4) to train young people and parents as peer educators on issues of sexuality and healthy life style choices and support them in bringing their message to young people and parents throughout the community.

The project strongly focuses on adolescents, ages 9 to 15 years old, for the purposes of promoting abstinence and making healthy choices based on their values which are supported by their family, peers and community.

The project intends to adapt an existing curriculum Families United to Prevent Teen Pregnancy to fit within the community context. With the involvement and permission of parents, this curriculum is used to present medically accurate information about sexuality, sexual development, pregnancy, and sexually transmitted diseases to adolescents in school and community settings.

Expected Findings/Results:

The outcomes and results of the program flow from our program objectives. The Adolescent Health Promotion Council produces a written plan for the formalization of a permanent community based Adolescent Health Promotion Project based on the years' lessons. Out of the participates who attend at least one session, 70% will show gains in awareness of values, sexuality and resources and options available to them for help in making healthy choices. Of the young people and their families that take part in the positive activities, a representative sample will show participation in the program made them more aware of the consequences of early sexual activity. The sample illustrates the young people's better understanding of their ability to make positive decisions and the recognition of their parent's support of their healthy lifestyles. It is expected that young people and their parents will take their message of abstinence and healthy choices to the community. They feel comfortable leading presentations about positive decision making and able to articulate their values and rationalizations for delaying sexual activity beyond the teenage years.

PROJECT SUMMARY APH 000425

Agency: Lake County Health Department
3010 Grand Avenue
Waukegan, IL 60085

Project Director: Susan Bekenstein

Phone Number: (847) 360-2931

Evaluator: Myrtis Sullivan, M.D., M.P.H.

Type of Project: Abstinence Education Demonstration Project

Model: School- and Community-Based

Project Start Date: October 1, 1997

Program Description:

The Future Is Ours/ El Futuro Es Nuestro offers intensive, predominantly school-based abstinence education services to sixth grade Latina girls. Small group education sessions are the primary means of intervention with sixth grade Latinas attending the five Waukegan public middle schools. Several small groups of girls at school meet twice a month. Community and family focused activities such as field trips, daughter/parent programs and a family-focused newsletter about Project activities complement the education groups in the schools.

Focus of the Demonstration:

The Project focuses on the following four points: (1) factual information supporting the benefits of abstinence; (2) pregnancy prevention “from the neck up” introducing and emphasizing opportunities for short- and long-term achievement; (3) parental and/or guardian involvement to strengthen communication and support for their daughter's positive choices; and (4) mentoring for participants from women in the community who have succeeded in achieving their academic, career and family goals.

The rationale for choosing to intervene at this grade level is twofold. First, assuming that the girls are age-appropriate for sixth grade, developmentally this is an opportune time to begin serious discussion and activities which will foster commitment to abstinence in future years. This is a time at which girls are more likely to seek involvement of a parent/other adult offering the opportunity to build stronger relationships that will guide these young women through their older adolescent years. Sixth grade girls are generally more homogeneous in their sexual development and groups are less likely to have some participants who are already sexually active and others who do not have a clue yet as to any personal sexual involvement.

On the other hand, Latina sixth graders may in fact be a year or more older than normally expected for the grade due to language barriers upon arrival to the United States and differences in educational standards in their country of origin. Further, there is evidence that girls of Latino descent physically mature earlier than their non-Latina peers. Based on general assumptions about cultural approaches to sexuality and reproduction, these young women are likely to have little factual information about reproduction or sexual health. Many have few opportunities to discuss these personal issues with adult family members.

Expected Findings/Results:

During each school year, the participating sixth grade girls increase their factual knowledge supporting the benefits of abstinence as measured by tests of knowledge. Each school year, targeted, participating sixth grade girls increase self-esteem, assertiveness and decision-making skills which enable them to practice abstinence and prevent future unplanned, unintended pregnancies as measured by a self-esteem index and tests of knowledge and attitudes. The participating sixth grade girls broaden their understanding of academic and career opportunities through presentations and direct observation/involvement with Latina women in career/leadership roles as measured by a vocational knowledge/choice index. Finally, parents or guardians of the participating sixth grade girls receive regular written information about the Future Is Ours/ El Futuro Es Nuestro and “Looking Ahead” and have the opportunity to seek individual advice and guidance from Latina women in career/leadership roles regarding academic, career and personal choices.

The evaluation of the Future Is Ours/ El Futuro Es Nuestro tests whether an intensive school-based, small group education program for sixth grade Latinas in four Waukegan middle schools can instill knowledge and understanding of the benefits of sexual abstinence and the delay of pregnancy, positive attitudes about sexual abstinence and the delay of pregnancy, knowledge and understanding of a variety of career choices and the steps needed to prepare for them, and goals for attaining academic and career achievement

PROJECT SUMMARY APH 000426

Agency: People's Regional Opportunity Program
510 Cumberland Avenue
Portland, ME 04101

Project Director: Betsy Sawyer-Manner

Phone Number: (207) 874-1140

Evaluator: Andrew Coburn, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The People's Regional Opportunity Program (PROP) in Portland, Maine provides WIC, Head Start, Transportation, Case Management, and Fuel Assistance services. In addition, PROP delivers high risk behavior prevention programming for youth in low-income housing projects through its Peer Leader Program.

This Abstinence Education Demonstration Project provides comprehensive adolescent pregnancy prevention programming to both male and female youth, in grades three through eight (ages 9-14), who reside within very low-income neighborhoods. Four of the five target neighborhoods have been identified by local health official as areas of the City which report the largest numbers of pregnancies and births to females under age nineteen. This project utilizes and improves upon PROP's existing high-risk behavior prevention programming, known as Peer Leader. Program interventions are delivered through the Peer Leader Program youth workers from within the target neighborhoods.

Focus of the Demonstration:

The project's primary focus is the development of skills, personal beliefs and behavior standards, and strengthening self-esteem among participants to enable them to make healthy choices regarding abstinence, sexual responsibility, and other high risk behavior initiation, as well as to develop goals and objectives for a healthy and productive future.

The project's objectives include: encourage youth to abstain from sexual activity; enlighten youth about non-sexual means of expressing affection and interest in relationships; increase youth awareness of personal future opportunities; educate youth around personal, financial, emotional and social costs associated with teen pregnancy; increase youth awareness around characteristics of healthy interpersonal relationships; increase youth knowledge of HIV/AIDS and other consequences of adolescent sexual activity; increase personal empowerment through enhanced decision-making skills and making choices regarding personal health and responsibility; and, examine the process of decision-making and the personal consequences of those decisions.

Expected Findings/Results:

It is expected that the project will show a reduction in rates of teen pregnancy in Portland through the existing and expanded outreach and delivery of the comprehensive, multiple component, social influence risk behavior prevention program known as Peer Leader. The program will result in increased numbers of Portland 'at-risk' youth receiving effective prevention programming with short-term outcomes of enhanced participant resiliency skills, and long-term outcomes of reduced incidences of high risk behavior initiation among target youth, which will result in the reduction of recorded teen pregnancy rates within the program target area.

To assess the impact of the pregnancy program model, the evaluation design consists of two inter-related components utilizing both qualitative and quantitative data. The first component is a process study to monitor program progress and determine whether the program has been carried out as planned. The second component is a non-equivalent comparison group pre- and post-test outcome study in which the prevention program's impact on adolescent and parental attitudes and behaviors is assessed at the program's start and completion. Testing measures effectiveness of existing school sexuality education curriculum as well as program intervention curriculum.

PROJECT SUMMARY APH 000427

Agency: Valley Boys and Girls Club
1021 Burrell Avenue
Lewiston, ID 83501

Project Director: (Acting) Bob Liming

Phone Number: (208) 746-2301

Evaluator: Cynthia J. Schmiede, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Program Description:

The Valley Boys and Girls Club is a community-based, non-profit organization with a focus on youth development. The Valley Boys & Girls Club is collaborating with four other agencies including Regional Public Transportation, Valley Family Youth and Resource Center, North Central District Health Department and the Adolescent Pregnancy Prevention Coalition. This AFL Abstinence Education Demonstration Project, entitled "Teens With A Vision," provides rural valley youth with an on-going educational program designed to teach the social, psychological, and health gains to be realized by abstaining from sexual activity.

Focus of the Demonstration:

The target population is youth ages 12-16 in grades six through ten. Participants are introduced to peer educators who will facilitate 5 classes, with 5 sessions per class, over the course of the year. The classes establish a "peer norm" that favors delaying sexual activity. Teens With A Vision provides 6 career track opportunities for participants. These career track opportunities allow the participants to ask guest speakers about their profession and absorb different ideas on how to set career goals.

The Valley Family Youth and Resource Center provides counseling services and referral linkages to participating youth and their families who are identified by Valley Boys and Girls Club staff as needing special services or voluntarily request those services.

Through the Teens With A Vision project, the Valley Boys and Girls Club hopes to instill the “peer norm” of delaying sexual activity through the Club's philosophy - by giving the participant in the program at least one adult who is consistently and positively available to them; at least one interest or activity that they feel they can do well; and a positive group to which they can belong.

This project has six main goals: (1) teach and model to youth, the social gains to be realized by abstaining from sexual activity; (2) teach and model to youth, the psychological gains to be realized by abstaining from sexual activity; (3) teach and model to youth, the health gains to be realized by abstaining from sexual activity; (4) impact participating youths' behavior regarding early sexual activity; (5) impact participating youths' attitudes regarding early sexual activity and teen pregnancy; and (6) increase participating youths' ability to acknowledge and use their gifts and talents in order to goal-set.

Expected Findings/Results:

This project will bring to light issues indigenous to rural youth regarding sexual behaviors during adolescence. Teens With A Vision, with its new approaches to youth and abstinence only training, will be able to impact all youth programs.

It is expected that this program will help youth, especially at-risk youth, develop the ability to goal-set for their future, using their gifts and talents and a positive orientation to the future, as a catalyst to refrain from early sexual involvement.

PROJECT SUMMARY APH 000428

Agency: Buffalo Federation of Neighborhood Centers
Buffalo Adolescent Pregnancy Prevention Services
1225 Main Street
Buffalo, NY 14209

Project Director: (Acting) Richard Saluda

Phone Number: (716) 885-1455

Evaluator: Kathleen Kost, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

The Family Abstinence Comprehensive Education Services (FACES) program is a comprehensive program with multiple facets and interventions. Within the pre-adolescent abstinence component, a Family Life and Development curriculum is taught to fourth and fifth grade students in seven targeted schools within the city of Buffalo. School personnel identify “natural groups” of youth, friendship networks, and peer groups within the schools so that youth in these groups will attend the program together. In this way, the abstinence education sessions have a more potent and positive impact.

The Buffalo Adolescent Pregnancy Prevention Services (BAPPS) recognizes parents as the primary providers of their children's sexuality education. Because some parents may not be comfortable in that role, FACES provides parents with informational workshops and opportunities to learn about the program and to view the materials to be used in the program. Through a series of workshops, parents are provided the tools to learn how to be comfortable speaking to their children about sexuality and abstinence and discuss the role media can play in lives of their children. A ten session curriculum for teacher training is provided for those who are interested in learning more about abstinence education in the Teacher Center. BAPPS has linked with community agencies to provide and train teens who will present an abstinence message through presentations or individual contact.

The FACES program is enhanced by the Peer Motivators intervention strategies with youth. The Peer Motivators are able to further enhance the involved peers' self-esteem, as they will be seen as role models for their peers. This model is incorporated into the pre-adolescent curriculum through presentations and role plays on refusal skills and of teen parenthood. All Peer Motivators have participated in a "Baby Think It Over" infant simulator experience.

The FACES program has three major goals: (1) promote responsible sexual behavior among pre-adolescents and adolescents; (2) conduct an evaluation of the FACES program; and (3) develop and implement a Fund Development Plan to sustain the FACES Program.

Expected Findings/Results:

The evaluation of FACES tests the program intervention premise that school-based pregnancy prevention and abstinence programs are more likely to reach their participants than those that are community-based. The evaluation also tests whether participation is increased by using a school-based pregnancy prevention and abstinence education program. The processes involved to implement and conduct the FACES program is also evaluated. All segments of the FACES program are assessed for their programmatic and process effectiveness.

The evaluation team works closely with FACES program personnel to ensure the evaluation of all critical program components and to make findings available to other researchers and practitioners. Since there is interest in a relatively large number of program evaluation questions, the evaluation is envisioned as broad based formative as well as summative. The evaluation plan incorporates written assessment tools and selected interviews, as well as a qualitative analysis of organization development.

PROJECT SUMMARY APH 000429

Agency: Community School District #18
Comprehensive School Health Education Program
755 East 100th Street
Brooklyn, NY 11236

Project Director: John Roberts, Ph.D.

Phone Number: (718) 927-5133

Evaluator: Alan J. Simon, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: School-Based

Project Start Date: October 1, 1997

Program Description:

Community School District 18, in collaboration with Brookdale Hospital Medical Center, is implementing a local abstinence education demonstration program for urban pre-adolescents and adolescents designed to teach the social, psychological and health gains to be realized by abstaining from sexual activity. The project targets high-risk youth in the fifth through eighth grades in the District's elementary and middle schools.

Focus of the Demonstration:

In order to reach adolescents before they become sexually active, and to promote self discipline, the district proposes a five prong program including: professional development, student instruction, parent/family education, counseling for students and their families, and curriculum/materials acquisition. Through the partnership and linkage with Brookdale Hospital Medical Center, referrals are provided to health services. The district's Intervention strategies are based on the research that abstinence-plus curricula with skills development, as part of a comprehensive health education program has been shown to be the most successful in studies of sexuality education. Professional development for teachers, guidance counselors and other support staff consists of full day training sessions, in-class demonstrations, peer coaching, and through Health and Wellness Team meetings.

The student program includes in-class instruction of the Sex Can Wait curriculum, opportunities to actively participate in a peer buddy program, student health and wellness councils and student-run school-wide health campaigns; and the availability of small group and individual counseling. An instruction video will be developed by Marquis Studios and will be tailor made to fit the District's needs. Parent activities provide parent leadership training and parent workshops; parent/child nights at each school; evening family counseling; and referrals for a variety of services provided at Brookdale Hospital.

This model for abstinence/prevention education developed in cooperation with the District Health Advisory Council and project partner Brookdale Hospital, is based on intensive research of what works in prevention programs for adolescents.

Expected Findings/Results:

It is expected that participating staff members will demonstrate increased knowledge of abstinence education and participation in training as measured by local surveys administered at the completion of training, for which participating staff will show knowledge and improved skills. Target teachers of 5th - 8th will increase the infusion of abstinence education concepts into the instructional programs for health education, science, career and home education; and increase the use of abstinence education instructional materials. Target students will demonstrate statistically significant gains in their knowledge and decision-making skill concerning healthy behaviors and practices, especially in relation to abstinence from sexual behaviors. Participating students will display positive behaviors and attitudes associated with the abstinence education curriculum. Participating turn-key parent leadership trainers will demonstrate increased knowledge of abstinence education. Participating parents/family members will demonstrate increased knowledge of, and interest in abstinence education for their children. An appropriate abstinence education video will be developed.

PROJECT SUMMARY APH 000430

Agency: University of South Carolina
College of Social Work
Columbia, SC 29208

Project Director: Sheila Marsh

Phone Number: (803) 777-1382

Evaluator: Sandra Glover, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Community Alliance for Pregnancy Prevention Education (CAPPE) is a collaborative project between the University of South Carolina's College of Social Work and two local communities with the highest adolescent pregnancy rates in the state. CAPPE is designed to promote abstinence among youth through the provision of a range of services to both youth and their families. The services include comprehensive sexuality educational and training programs for parents, teachers, and youth.

Career exploration and mentoring offers alternatives to youth to delay the onset of early sexual involvement. The broad based initiatives involve collaboration between youth, parents, schools, health care, media, and community-based agencies. The services are sensitive to class, gender, and culture, and are provided in both school and community settings. CAPPE targets males and females, ages 10-14 for intensive intervention, in addition to providing universal comprehensive sexuality education for students in this age range. Parents receive educational support that will enable them to become their child's sexuality educator.

Focus of the Demonstration:

CAPPE seeks to show the effectiveness of collaboration between youth, families, and communities in creating optimal environments for youth development, thereby delaying the onset of sexual activity. The goal is to expand life options and implement changes in the social environment.

Some of the project's objectives include the following: provide youth information for skill development that will enable them to postpone sexual activity; increase knowledge and communication in families who participate in the project; help prepare parents to become primary providers of sexuality education; provide leadership training for youth through mentoring and a rite of passage program; provide academic enhancement opportunities to participants through tutoring; develop a community advisory council, which will assist the community in taking an active role in teen pregnancy prevention; and develop a media awareness campaign to increase community awareness about the problems of teenage pregnancy and its responsibility to intervene in the problem.

These goals and objectives are achieved by using micro and macro social work approaches to provide services to program participants. Sexuality education is provided through small groups using the Sex Can Wait curriculum for upper elementary, and the Managing Pressures Before Marriage curriculum for the middle-school students. Weekly group tutoring programs are established for all program participants. Targeted youth participate in a rite of passage program, which uses developmental and educational processes to assist and prepare young people in becoming adults. Parents of the targeted adolescents and pre-adolescents participate in both sexuality education and parent support groups. Small groups are used to provide participants with information and develop appropriate social skills.

Expected Findings/Results:

It is expected that this primary prevention project will anticipate the settings and conditions under which sexual activity and pregnancies are more likely to occur and establish opportunities for alternative behavior and activities. CAPPE maximizes resources by support existing services for this population. Parental involvement and continued community support enhances the likelihood of changed behaviors.

The evaluation component uses both quantitative and qualitative methodologies. Program evaluation includes pre- and post-testing using the Sex Can Wait evaluation instrument and other pre- and post-measures. Outcome variables include, but are not limited to, the type and amount of information provided in the targeted communities, community attitudes about teen pregnancy, involvement of parents in providing sexuality education and the effects of mentoring and tutoring.

PROJECT SUMMARY APH 000431

Agency: Mt. Sinai Hospital
Adolescent Health Center
320 East 94th Street
New York, NY 10128

Project Director: Cydelle Berlin, Ph.D.

Phone Number: (212) 423-3000

Evaluator: Erwin Epstein, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Hospital- and School-Based

Project Start Date: October 1, 1997

Program Description:

The Adolescent Health Center of Mount Sinai Hospital, a component of the Department of Pediatrics, is a free standing primary health care facility specifically designed to provide comprehensive medical care, health education and mental health services to adolescents and their families at low or no cost. The Adolescent Health Center has no catchment area and serves youth from throughout the New York City area. Most of the adolescents come from the East Harlem, Central Harlem and South Bronx communities.

Focus of the Demonstration:

The STAR LO Multiple Intervention Primary Prevention Project targets high risk urban youth ages 10-12 and represents a collaborative effort between Mount Sinai's Adolescent Health Center and the New York City Public Schools. The intervention is held with young people in sixth grade classes in four inner city schools in the East Harlem, Manhattan Valley and Lower East Side communities of Manhattan. Parents and/or parent-surrogates are involved, as well as teachers and staff at the participating schools.

The overall goals of the project are : (1)to reach out to pre-adolescents order to expand, enhance, deliver and evaluate a community based and community supported demonstration to find effective means of preventing pregnancy by encouraging participants to abstain from sexual activity through provision of age appropriate, culturally competent education on sexuality and decision making skills; and (2) to reach out to parents and parent-surrogates of the core group of pre-adolescents targeted in order to develop, deliver and evaluate a pilot pregnancy prevention training curriculum which will complement the children' intervention.

This project enables expansion and evaluation of STAR LO, an interactive educational theater prevention program started in 1991. Each cycle has six sessions, starting with an original performance which is followed by five weekly workshops. The model assists the group of 10-12 year old youths to acquire the knowledge and skills necessary to instill healthy attitudes and behaviors which support abstinence from sexual activity. In addition, a training curriculum for parents has been developed and is delivered to help parents feel more comfortable talking with their children about sensitive subjects and to support them in their role as primary sexuality educators of their children. Trainings are provided to teachers and staff at the participating schools.

During the first project year, the program concentrates services in four Manhattan elementary schools. Project staff: (1) recruit and train actor educators in order to expand the current theatrical repertoire for STAR LO; (2) recruit a core group of sixth graders and provide them with eight cycles of six-hour STAR LO theater intervention; (3) use focus groups to develop at least four new scenarios addressing issues which are relevant to the project; (4) implements a six-session written curriculum which will complement the theatrical presentations; and (5) delivers a training curriculum for parents which includes lessons about adolescent development, puberty, reproductive health, abstinence and abuse issues.

Expected Findings/Results:

The STAR LO project assists the group of youths acquire the knowledge and skills necessary to instill healthy attitudes and behaviors which will support abstinence from sexual activity. At the conclusion of the intervention it is expected that the participating youth will have increased knowledge by 100%, a minimum of 50% will have more positive attitudes, and a minimum of 50% will avoid sexual behaviors and will adopt less risky behaviors.

The project evaluation assesses the effectiveness of the project using both quantitative and qualitative measures. A pre and post test questionnaire is used for youth participants, and an analysis of the project is undertaken using open ended interviews with participants. A satisfaction survey for youth, parents and teachers is also implemented.

PROJECT SUMMARY APH 000432

Agency: Tulane University School of Public Health & Tropical Medicine
Department of Community Health Sciences/SL 29
1501 Canal Street
New Orleans, LA 70112

Project Director: Elizabeth Bennett, Ed.D.

Phone Number: (504) 584-3544

Evaluator: Janet Rice, Ph.D.

Type of Project: Abstinence Education Demonstration Project

Model: Community-Based

Project Start Date: October 1, 1997

Project Description:

The Students of Service (SOS) Adolescent Family Life (AFL) Demonstration Project is implemented by Tulane University School of Public Health and Tropical Medicine in partnership with, the Vermilion Task Force on Teen Pregnancy Prevention, a community-based volunteer agency.

The SOS program is a highly successful community-based and community supported program in the Abbeville area in southwestern Louisiana. Each year SOS Club members comprised of 9th through 12th graders who have signed abstinence pledges, regularly visit local elementary and middle schools to discuss, role-play, and mentor young adolescents on the importance of abstinence from alcohol, drugs, tobacco, violence, and sexual activity.

Focus of the Demonstration:

The project focuses on pre-adolescents, adolescents, and their families to promote abstinence by redirecting activity into more positive and appropriate behaviors. The SOS mentoring program is enhanced by the addition of a family life skills component that strengthens the focus on abstinence education. This is based on the Managing Pressures Before Marriage curriculum for preteens.

The SOS AFL demonstration project has 4 program objectives including strategies. The first

objective is to increase the sexual abstinence rates of adolescent girls and boys (aged 9-14) participating in the SOS program in comparison with a control group of non-participants. This objective is achieved by formalizing the SOS program into monthly peer mentoring activities in participating schools as conducted by senior high school SOS participants, and by initiating a Saturday program of twice monthly meetings consisting of a life skills curriculum-based program focusing on abstinence education.

The second objective is to enlarge the scope of the SOS program by focusing on parents and families as well as SOS students in elementary, middle and senior high schools, by requiring a pledge of abstinence from drugs, alcohol, tobacco, violence and sexual activity from elementary, middle, and senior high school student participants and by initiating for participating families a Saturday program of twice monthly meetings focusing on family life skills activities.

The third program objective is to lower the rates of sexual activity for those who have already initiated sex by redirecting activity into more positive/appropriate behaviors focusing on school achievement and qualities of self-esteem. The activities which meet this objective include teaching social, psychological benefits and health gains, and the value of self-discipline.

The final objective is to evaluate the impact on teen pregnancy rates in Vermilion Parish of the current SOS program of peer mentoring, in conjunction with newly-initiated Saturday activities of life skills education and family life counseling, for purposes of program replication elsewhere in Louisiana. The project initiates and maintains a data base on program participants, and monitors all program activities by administering a pre- and post-test at six months and one year after program initiation.

Expected Findings/Results:

It is expected that the project activities will stimulate an increase of student' knowledge, attitudes, and behavior related to sexual abstinence as measured by pre- and post-tests at six months of implementation and one year after program initiation. Outcomes to be identified include knowledge of social, psychological and health gains to be achieved from sexual abstinence. Other outcomes to be measured include increased communication between parents and adolescents regarding issues such as relationships, sexual activity, substance abuse, and ability to resist peer pressure.

PROJECT SUMMARY - APH 100367

Agency: South Carolina Department of Health and Environmental Control
Waccamaw Public Health District
2830 Oak Street
Conway, SC 29526

Project Director: James L. Coleman, Jr., Ed.D.

Phone Number: (803) 365-3126, Ext. 201

Evaluator: Romel Lacson, M.P.H.

Type of Project: Pilot Prevention Demonstration Project

Model: School-Based

Project Start Date: August 1997

Program Description:

The South Carolina Department of Health and Environmental Control provides public health programs through local health departments in Georgetown, Horry and Williamsburg Counties. The role of the public health department is to prevent health problems and to protect the environment. The scope of services offered by the Health District include Women, Infants and Children Services (WIC); Children's Rehabilitative Services; BabyNet; Child Health Services and Immunizations; Family Planning Services; Environmental Health Services; Food Protection Services; Vital Records; Sexually Transmitted Disease Services; EPI Team; Tuberculosis Services; Foreign Travel Immunizations; Family Support Services; Health Promotion; HIV/AIDS Program Services; and Home Health Care Services. The current AFL Pilot Project provides an abstinence-based initiative team to provide information and training in postponing sexual involvement.

Focus of the Demonstration:

The Williamsburg Abstinence Initiative Team (WAIT) Project employs parents as Health Education Assistants for 7th and 8th grade students enrolled in the Williamsburg County School District. The project focuses on promoting abstinence and teaching strategies for responsible decision making and reinforces the role of parents as providers of sexuality education.

The project provides both factual information and skills building activities to young adolescents. Additionally, the project improves adolescents' perceptions and acceptance of abstinence as a positive and desirable behavior standard. The parent-educators provide a comprehensive framework in which communication between parents and children can take place. This strategy serves as a primary prevention tool to reduce the risks of premature sexual activity and help prepare adolescents for the choices they will face as adults. The Health Education Assistants are also trained to identify and refer students in need of comprehensive services to the Family Support Services unit located within the Williamsburg County Health Department.

The project has three goals and five objectives. The overall goals are (1) to provide abstinence education for young adolescents enrolled in the Williamsburg County School District, (2) to demonstrate the effectiveness of parent-educators in implementing an abstinence based curriculum in a school setting, and (3) to improve communication between parents and their children about sexuality and the consequences of premature sexual activity. The objectives seek to (1) increase knowledge of the risks and consequences of premature sexual activity among the target population, (2) encourage participants to examine attitudes related to personal risk and choices of behavior related to health, drug use and initiating sexual activity, (3) improve decision making and communication skills necessary for postponing sexual activity among adolescents, (4) increase knowledge of and improve access to resources for maintaining sexual abstinence, and (5) improve acceptance of abstinence among the target population as an accepted behavior standard. The overall activities include curriculum education (Managing Pressures Before Marriage), skills building activities, and group exercises.

Expected Findings/Results:

The project intends to reduce the incidence of adolescent sexual risk taking, which over the long term will reduce the incidence of adolescent pregnancy in Williamsburg County. Further, it is expected that education of adolescent pregnancy will reduce expenditures for treatment of other conditions resulting from premature sexual activity in the population, including sexually transmitted diseases and HIV infection. The project will provide a mechanism for increasing meaningful interactions among youth, families and the community, thus building the community's capacity to support the positive choices young people make. Adolescents, families, and the community will work as partners to achieve the common goals. The benefits expected for the target population include the opportunity to master communication skills necessary to resist pressure, and the opportunity to receive support and guidance from responsible and caring adults.

PROJECT SUMMARY - APH 100368

Agency: ASPIRA of Florida, Inc.
3650 N. Miami Avenue
Miami, FL 33127

Project Director: Maria Jimenez

Phone Number: (305) 246-1111

Evaluator: Norman Powell, Ed.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School- and Community-Based

Project Start Date: August 1997

Program Description:

ASPIRA of Florida, Inc. provides services to at-risk Latino and other minority youth. The AFL Project is located in rural South Dade, approximately 40 miles south of Miami. The target population is Latino migrant and other students who live in migrant camps and attend Leisure City Elementary and Accolade South, an ASPIRA Alternative Middle School.

Focus of the Demonstration:

The project's overall goal is to reduce teen pregnancy among Latino migrant and other minority youth, ages 9-14, who live in rural South Dade. ASPIRA implements the ASPIRA Adolescent Family Life Prevention Project in two ASPIRA clubs for elementary and middle school Latino migrant and other minority youth. The ASPIRANTES (club members) learn and acquire knowledge that fosters healthy attitudes, reinforces sexual abstinence and supports educational goals. This project is enhanced through an intensive parent training program. Parents of the students are invited to attend monthly sessions on reinforcing abstinence behavior and positive decision making among their children.

Some of the included program activities are the Young Latinas Health Conference, Muchachos Summits, community Task Force meetings and educational resource development in English, Spanish and pictures for non-reading adults. ASPIRA uses the Managing Pressures Before Marriage curriculum.

Expected Results/Findings:

As a result of this project, the students will increase their knowledge of consequences of teen pregnancy, master the skills for avoiding teen pregnancy and advocate abstinence. The parents will increase their ability to communicate with their children during the difficult adolescent years.

PROJECT SUMMARY - APH 100369

Agency: Tulane University
Psychology Department
6823 Saint Charles Avenue
New Orleans, LA 70118

Project Director: Barbara E. Moely, Ph.D.

Phone Number: (504) 862-3322

Evaluator: Laura Sanchez, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

The Campus Affiliates Program (CAP) is a collaboration between the Residents' Council of the C.J. Peete Housing Development, the Housing Authority of New Orleans, the U.S. Department of Housing and Urban Development, Xavier University of Louisiana, and Tulane University. The project builds on health and education programs currently running within the community through CAP.

Focus of the Demonstration:

The CAP Positive Talk Pregnancy Prevention and Life Skills Program uses the Managing Pressures Before Marriage curriculum. Sixth grade students who attend school within the predominantly African-American community receive curriculum instruction from high school students. Following a model developed by the CAP program, interventions with the sixth grade students are carried out by high school students attending schools from the same targeted community. Through the curriculum activities, these high school "Peer Educators" serve as mentors and role models for the younger students.

The project aims to help youth consider behaviors and activities that prevent or postpone teenage sexual activity. Participants learn how to deal with sexual advances and how alcohol and drug use increases vulnerability to sexual advances. They learn about family life and problems associated with adolescent premarital sexual relations. In addition to dealing specifically with issues of sexuality, the project emphasizes positive personal life goals that adolescents can adopt concerning education and career choices. The project encourages personal decision-making, responsibility, and self-discipline. Parental involvement is actively sought in order to strengthen the impact of the project on the participants. The Peer Educators, through their participation, develop leadership and mentoring skills.

Expected Findings/Results:

The evaluation of the project includes a pre-test and post-test assessment of sixth grade students' knowledge of STD's and pregnancy, and their willingness to remain abstinent. Students' satisfaction with the education program will be assessed at the end of the project. It is expected that the students' knowledge and attitudes about sexuality will be changed and that they will express more ambitious goals with regard to future educational and career accomplishments.

At the end of the project, focus group discussions will be conducted with the Peer Educators. These discussions will address their views of the effectiveness of the project and their recommendations for changes in any further sexual abstinence programs. Discussion topics will also include, attitudes about peer pressure, the personal risk of premarital sex, unplanned pregnancy and STD's, and beliefs about the social causes and consequences of the early sexual activity among African-American youth. Through the Peer Educators comments, information about successful program delivery can be obtained for use in larger future efforts.

PROJECT SUMMARY - APH 100370

Agency: Vista Community Clinic
981 Vale Terrace
Vista, CA 92084

Project Director: Fernando Sanudo

Phone Number: (760) 631-5040

Evaluator: Lawrence Palinkas, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School- and Community-Based

Project Start Date: August 1997

Program Description:

Vista Community Clinic is a private, non-profit, community-based clinic, which provides prenatal care, pediatrics, adult general medicine, family planning, HIV screening and testing, health care for the homeless, geriatric services, and preventive services to residents in North San Diego County. The AFL Pilot Project provides the Managing Pressures Before Marriage curriculum to young teens and pre-teens in schools and community agencies in North San Diego County.

Focus of the Demonstration:

Using the Managing Pressures Before Marriage curriculum, the educational sessions are aimed at assisting pre-teens and young teens in developing healthy attitudes about sexuality. The goal of the project is to reduce teen pregnancy by encouraging young people, ages 9-14 years to postpone sexual involvement. The following objectives are implemented in the project: (1) the Managing Pressures Before Marriage curriculum for pre-teens is provided in English and Spanish for children ages 9-11 years; (2) the Managing Pressures Before Marriage curriculum for young teens is provided in English and Spanish for teens ages 12-14 years; (3) The Managing Pressures Before Marriage curriculum for Teen Leaders is provided for older teens ages 15-18 years; and (4) The Managing Pressures Before Marriage curriculum for parents is provided in English and Spanish for the parents of the 9-14 year old participants.

Expected Results/Findings:

Thirty percent of pre-teens and 30% of young teens receive a pre- and post-test for the Managing Pressures Before Marriage curriculum in order to determine if the students' knowledge and skills have changed. Seventy percent of parents who participate in the project will complete presenter evaluation forms. Teen leaders will demonstrate a 90% knowledge competency as measured by observation. Data will be entered into a data-base and analyzed for program reports.

PROJECT SUMMARY - APH 100371

Agency: Children's Outing Association
909 East North Avenue
Milwaukee, WI 53212

Project Director: Christine Grotta

Phone Number: (414) 263-8397

Evaluator: Gregory Hildebrand, M.S.W.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community-Based

Project Start Date: August 1997

Program Description:

Children's Outing Association (COA) began as a single-service camping organization in 1906 and has added neighborhood programming for elementary children and teenagers, adult GED education, day camp, youth employment and comprehensive child care. More recently, COA completed a successful \$1.8 million capital campaign and constructed a new community and child care center. With this expansion, COA added more child care programs, created a neighborhood center, a wide range of recreational and athletic programs, and a highly successful family resource center. In addition, COA has been asked by the city Housing Authority to replicate its programs at the Lapham Park public housing development where COA is helping to create a new community and family center.

Predom, the AFL Demonstration Pilot Project, is an after school educational/recreational program serving neighborhood youth ages 11-13. This comprehensive project provides opportunities to learn positive decision making and life planning skills, caring well-trained adult role models, and community involvement. This voluntary project aims to help pre-adolescents acquire knowledge and skills that will instill healthy attitudes, along with encouraging and supporting sexual abstinence.

Focus of the Demonstration:

The project addresses key developmental areas that are important in the delay of sexual activity and prevention of other negative outcomes. The ability to make good decisions as well as the confidence to be a leader among one's peers and a role model are of particular importance. Predom seeks to develop these outcomes through a wide range of educational/recreational programming which will be enhanced by the use of the curriculum education. The community service learning, science and math exploration activities, nutrition counseling and education and physical fitness activities are included as a part of a comprehensive leadership development program. The overall goal of COA's Predom project is to enhance current after school programming, via the use of curriculum education to help pre-teens develop and sustain healthy perspectives about their bodies and encourage sexual abstinence.

All direct service staff undergo an intensive training program focusing on youth/adult partnerships, diversity, program development and delivery, group and behavior management, safety and risk management, age level characteristics and team building.

There are five main objectives to this project: (1) to improve 50% of participants ability to demonstrate positive decision making and problem solving skills regarding risky behaviors and sexual activity, (2) to increase positive social interaction behaviors in 80% of participants as demonstrated through relationship development, (3) to enable 20% of participants to demonstrate group participation skills which require leadership, self-confidence and motivation through role modeling and active participation in leadership roles, (4) to ensure 80% of participants demonstrate growth in leadership, self-confidence, and motivation, and (5) to enable 60% of participants to develop healthy attitudes about sexual behavior and activity as self-reported on a program evaluation survey.

Expected Findings/Results:

The project helps pre-adolescents acquire knowledge and skills that instill healthy attitudes to encourage and support abstinence by providing comprehensive educational/recreational activities. The overall program focuses on a wide range of interests and topics to help encourage development of well-rounded individuals who not only believe they have a future, but can actively envision a plan for it.

One of the key elements of the project's success is that the wide range of program opportunities ensures ongoing participation by members. As part of an overall education/recreation program, which young people can attend daily and receive support and nurturing from caring adults, activities and programming specifically focused on sensitive issues and topics will be welcomed and enjoy active participation. Predom works to instill healthy habits and life skills. With the added focus of development and sexuality, more emphasis on the choice of sexual abstinence can be made.

PROJECT SUMMARY - APH 100372

Agency: Rocky Boy School District 87J
RR 1 Box 620
Box Elder, MT 59521

Project Director: Sandra Murie, Superintendent

Phone Number: (406) 395-4474

Evaluator: Jewel Hawk

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

The Adolescent Family Life Prevention Project Coordinator works with teachers in grades 4-8 using the Sex Can Wait curriculum. The coordinator also works with an Advisory Committee made up of parents of teens, teen parents, as well as other community groups to create a Teen Pregnancy Prevention Advisory Committee in order to promote abstinence education.

Focus of the Demonstration:

The overall goal is to promote abstinence as the only rationale to prevent pre-teen and teen pregnancies. The pilot project addresses Goal 8 under the Goals 2000 where "every school will promote partnerships that will increase parental involvement and participation in promoting the social, emotional and education growth of children."

The project's main objective is to implement and pilot test the Sex Can Wait curriculum for students in grades 4-8 (ages 9-14 years) thereby lowering the teen pregnancy rate by a minimum of 15%.

Educational training on sexuality and decision making skills are provided for both male and female adolescents. Student selection is based on recommendations from parents, teachers, counselors and other concerned adults.

The curriculum is modified for age appropriateness. Lessons include homework assignments that are completed by parents and students together, giving young people the opportunity to learn about their parents' beliefs and experiences and, at the same time, providing an opportunity for parents to participate in their child's learning process.

Expected Findings/Results:

The following benefits and results are expected: (1) teen pregnancy rate will decrease significantly, (2) parents of teens will become active partners with the school system in promoting abstinence as the only way to reduce teen pregnancy, and (3) STDs among teens will significantly decrease.

PROJECT SUMMARY - APH 100373

Agency: Lao Family Community of Minnesota, Inc.
320 W. University Avenue
St. Paul, MN 55103

Project Director: Christina Erickson

Phone Number: (612) 221-0069

Evaluator: Anthony Bibus, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School- and Community-Based

Project Start Date: August 1997

Program Description:

The Kev Xaiv (Making Choices) project targets Hmong youth in grades 6-9. The Hmong people began moving to the United States in the mid 1970's. Having fought alongside the Americans against Communism during the Viet Nam War, the Hmong fled their communist ruled homeland of Laos to simply survive. One of the largest settlements of Hmong people is in St. Paul, Minnesota. Structured by a clan system, Hmong people live in a tightly knit community that espouses community good over personal good. Many Hmong adults continue to speak only Hmong and follow many of the traditional ways as they did in their homeland of Laos. Meanwhile, Hmong youth are caught in a difficult struggle of amending traditional family ways of life to that of the very different Western ways. Many activities and events that American parents consider a part of normal day to day life pose a whole new realm of challenges for Hmong families, making it difficult for Hmong parents to understand the developmental process and the meaning of being an effective parent.

Utilizing a three pronged approach, the program goal is to prevent first pregnancies in Hmong teens by providing them with the knowledge and skills necessary to make healthy decisions. The first project component consists of education groups utilizing the Managing Pressures Before Marriage curriculum, taught by bilingual Hmong counselors who provide the educational information combined with the cultural aspect to meet the needs of the targeted youth. The second Kev Xaiv parenting component requires parents to attend a Managing Pressures Before Marriage curriculum workshop facilitated by the Hmong speaking counselors. This factor is important because virtually all of the parents involved in the project speak only Hmong, or limited English. The final component is the Community Outreach campaign, which provides information and outreach at community events, informing public school workers, reaching community members through Hmong radio and newspapers, and providing speaking engagements to groups interested in ending pregnancy in young people by supporting a message of waiting.

Focus of the Demonstration:

The overall goal of the project is to reduce teen pregnancy by using a community capacity building model that builds on the resources of youth to resist sexual pressure, teaching parents how to help their sons and daughters deal with the pressures while simultaneously reaching out to the community with positive messages on why waiting is the best option for young people.

Using the three pronged approach, this project will meet the following objectives: (1) 70% of the participating youth will report that they have the skills to say no to sex or to engage in sex only when married, (2) 70% of Hmong parents who participate in the parenting workshops will report an understanding of issues American teens face and ways they can help their children make healthy decisions, and (3) 90% of the community advising council will participate in a survey and report an agreement with the statement "Our efforts have built a preventative capacity on pregnancy prevention within the community."

Expected Findings/Results:

The evaluation utilizes pre- and post-tests in written form for the participating adolescents. The parent component is evaluated verbally through telephone interviews because most Hmong adults do not read English or Hmong. There will also be an evaluation of the community advisory council in written form, or verbal, depending on the needs of the members of the council.

PROJECT SUMMARY - APH 100374

Agency: Latin American Youth Center
1419 Columbia Road, N.W.
Washington, DC 20009

Project Director: Diane Cottman

Phone Number: (202) 319-2225

Evaluator: Ana Lilia Solis

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

The Latin American Youth Center is a multi-cultural, multi-service community youth center serving Latino, Vietnamese, Caribbean, African, and African-American District residents. The Teens Trained Around Responsible Sexuality (TEENSTARS) project is a school-based prevention project whose goal is to employ effective means of preventing teen pregnancy through promotion of abstinence and to establish a comprehensive and integrated approach to the delivery of services to students and their families.

Focus of the Demonstration:

TEENSTARS uses a holistic approach toward teen pregnancy prevention by applying a combination of sexuality education, social skills enhancement, family enrichment activities and a public awareness campaign. The target population consists of youth, ages 9-14 years, who attend school in the community multi-cultural middle school. The Sex Can Wait curriculum is lead by an adult facilitator, and enhanced by young adult mentor/teachers. Widespread community support for the project is achieved through encouraged involvement from the students' families, voluntary associations, religious and other community-based agencies in both the public and private sectors. Translations into Vietnamese and Spanish is provided for non-English speaking participants.

The activities in this five-week abstinence project are designed to teach young people life skills that

can help them to act in their own best interests in all areas of their lives. Following the Sex Can Wait curriculum model, there are three areas of emphasis: Knowing Myself, Relating to Others, and Planning My Future. In addition to the curriculum education, the Latin American Youth Center employs a holistic approach toward teen pregnancy prevention by utilizing a combination of (1) sexuality education, (2) social skills enhancement, (3) family enrichment activities, and (4) a public awareness campaign.

Expected Findings/Results:

The project evaluator measures the outcomes as well as monitors the processes to determine if the program is being carried out as planned. Pre- and post-tests have been developed to measure the impact of the curriculum on participants' knowledge and attitudes with respect to abstinence, STDs, anatomy and physiology, sexual activity and other topics. A six month follow up test will be administered to measure further changes in behavior and attitudes. The public awareness campaign will be evaluated based on a variety of responses to the campaign. Each step in the implementation of the campaign will be subject to measurement.

The abstinence education should (1) provide increased knowledge and enhance decision making skills, (2) prevent overall adolescent pregnancies, (3) prevent STDs, including HIV/AIDS, (4) increase communication between parents and their children, (5) promote the education through continuation in school, and (6) increase self-esteem, self- expectation and awareness of life options.

PROJECT SUMMARY - APH 100375

Agency: YWCA of Watsonville, CA
340 East Beach Street
Watsonville, CA 95076

Project Director: Ann Daugherty

Phone Number: (408) 724-6078

Evaluator: Jerry Endres, M.S.W.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

YW-Teens is sponsored by the YWCA of Watsonville and implemented with support from two collaborators: ETR Associates and the Pajaro Valley Unified School District Healthy Start program. These agencies work together to address the problem of an extremely high (12%) teen birth rate in the Pajaro Valley. This geographic area is a Federal Enterprise Community with a poverty level among Latinos of 58.2%, an unemployment rate as high as 28% during the year, residential overcrowding at 45.6%, and violent crime and drug use rates that are four times the national average.

Focus of the Demonstration:

The goal of this project is to reduce teen pregnancy by offering participants opportunities to develop the knowledge, skills and motivation necessary to avoid early parenting; to delay their initiation of sexual activity; and to develop wise decisions about sexuality throughout their lifetimes.

The five objects supporting this goal are: (1) program participants view sexual abstinence as a viable and desirable option and recognize that many active, popular teens are choosing to postpone sexual activity, (2) participants list three reasons to postpone sexual activity, (3) participants identify some of the ways that media and peers contribute to the pressure to have sex, (4) participants can demonstrate their ability to use specific assertiveness techniques and communication styles to help them resist the pressure to have sex, and (5) participants identify the negative effects that alcohol and drugs have on their judgement and ability to make wise decisions.

YW-Teens provides the positive peer support, education, information, fun and encouragement that young people need to stay in school and create a healthy adolescence. It helps fill the after-school hours with supervised, constructive activities that meet the need for safety and status and attract young people away from involvement in gangs. YW-Teens is a comprehensive program that addresses the many issues confronting the healthy development of adolescents. The participants gain social acceptance, problem-solving skills, autonomy, sense of purpose and hope for the future.

YW-Teens is offered three times during the school year and meets weekly for eight to ten weeks at Pajaro Middle School from 3:00 pm to 5:00 pm. Bilingual, bi-cultural leaders use upbeat, interactive games aimed at enhancing self-esteem, combating negative gender and racial stereotypes, building team spirit and empowering youth to take leadership in the group. They also facilitate opportunities for peer counseling which is very effective in building group unity and a sense of connection. Guest speakers include older youth role models, professional family-life educators, counselors, teachers and other community leaders. Refreshments and social time are an important part of the meeting.

The project targets 11-14 year old males and females who are enrolled at the predominantly Hispanic Pajaro Middle School. Students are primarily self-selected, but the Healthy Start staff also refers students based on predictors of teen pregnancy such as: absence of life goals, poor school performance, limited attention span, limited school and community involvement, and indicators of family dysfunction.

Expected Findings/Results:

Pre- and Post-test surveys are administered to participants to determine the level of knowledge and current attitudes, beliefs and behaviors. At project end, the findings will be analyzed to determine if the interventions resulted in achievement of the outcome objectives. Interviews with collaboration members, program staff, and program participants will be conducted to determine factors that facilitated or hindered achievement of the desired outcomes.

It is anticipated that the participants will be better prepared to combat social and peer pressure and influences to have sex, and they will have the confidence to develop and choose their own values based on knowledge of the benefits of abstinence health. It is further expected that teen birth rates will drop as a result of these positive choices.

PROJECT SUMMARY - APH 100376

Agency: NOWCAP
P.O. Box 158
Worland, WY 82401

Project Director: E.J. Stolns

Phone Number: (307) 532-2600

Evaluator: Marilyn Thayer

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community-Based

Project Start Date: August 1997

Program Description:

Northwest Community Action Programs (NOWCAP) of Wyoming, Inc. is a broad based human service organization established in 1965, which operates programs across Wyoming. NOWCAP of Torrington has implemented an Adolescent Family Life Pilot Demonstration to enhance and integrate comprehensive case management services for at-risk adolescents to promote life skills that lead to improved choices among adolescents. The emphasis is on responsible sexual behaviors, prevention of alcohol and illicit drug use/abuse, educational attainment and future life goals.

Focus of the Demonstration:

A Youth Development Specialist provides intensive case management services, assessment and extensive contact with participating clients, and their parents. Case management focuses on educational/career/social guidance highlighting how abstinence from sexual activity and other behaviors contributes to attainment of personal goals. This emphasis instills healthy attitudes and motivation towards extracurricular activities and contributes to personal goal development, long-term life satisfaction and self-sufficiency. When appropriate, access to medically accurate information which relates to reducing the risk of unintended pregnancy and disease is made. However, abstinence from sexual activity is promoted as the best choice to prevent pregnancy and STDs.

The case management approach uses the Sex Can Wait curriculum. The skill-based curriculum helps

young people look at how they are now (self-image, self-esteem), where they want to go in their lives (life-planning) and how they can successfully make the transition from puberty to adulthood (life-skills). Sex Can Wait presents the postponement of sexual involvement as an important strategy to accomplish a successful, healthy transition. It helps pre-adolescents and young adolescents acquire knowledge and skills that will instill healthy attitudes while encouraging and supporting the postponement of early sexual activity. The emphasis on Sex Can Wait is on building skills; skills that will help young people make wise decisions, postpone sexual involvement and be successful in life.

There are six overall objects for this project: (1) to help adolescents gain a greater sense of personal well-being and contribute to their long-term life satisfaction, (2) reduce the rate of teen pregnancy by teaching adolescents the benefits of postponing sexual involvement, (3) to refer teens at high risk for pregnancy and their families to a variety of integrated services available within the service area, (4) to raise the awareness of the extent of teenage pregnancy within the community and its impact, (5) to encourage educational advancement for adolescent project participants, and (6) to increase family support systems and role models for at-risk adolescents within the community.

The project concentrates on recruiting adolescent participants, implementing the Sex Can Wait curriculum, and building community support. The target age for this project is 9-17 year old males and females. The participants are recruited and referred from local service provider agencies. The overall focus is on building life skills while postponing sexual involvement. Additional case management services are provided for the participant's parents.

Expected Findings/Results:

The adolescents and parents involved in the project will attain skills needed for communicating and coping with adolescent sexual issues. These skills permit the participants to cope with obstacles, which could prevent attainment of future self-sufficiency. Adolescent participants exit the program with a greater sense of personal well-being.

For purposes of evaluation, a review is completed of the project's progress and success in achieving the objectives of promoting sexual abstinence to attain educational goals and self-sufficiency. The files of each adolescent are evaluated to assess the progress made. Referral sources are interviewed for their perceptions on client and family progress. In addition, parents are asked about their perceptions of family life/sexuality education programs, and their own comfort and ability to teach their children postponement of sexual activity. Both parents and adolescents are asked to complete a questionnaire which measures progress and project satisfaction.

PROJECT SUMMARY - APH 100377

Agency: Pike County Board of Education
P.O. Box 3097
Pikeville, KY 41502

Project Director: Angeline E. Banks

Phone Number: (606) 432-7854

Evaluator: Dr. Willa Webb

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

The Pike County Board of Education/School System is the third largest school system in the state of Kentucky. The School System provides educational services for the youth of Pike County. The project Adolescent Family Life Pilot Demonstration uses a holistic approach to address premarital sexual activity among adolescents in the area. The primary focus of the project is that the youth of Pike County will receive the same abstinence message throughout middle school.

Focus of the Demonstration:

The primary project goals are (1) to reduce the number of pregnant teens in the school system, (2) to present an abstinence based curriculum to all students in grades 6, 7 and 8, (3) to sustain the role of the family, and (4) to encourage healthy living practices by encouraging adolescents to abstain from sexual activity until marriage. These goals are to be achieved through a combination of two prevention curricula. Managing Pressures Before Marriage is implemented to all 6th and 8th graders and Sex Can Wait is implemented with all 7th graders. Peer Educators aide in facilitation and give presentations to participants. The project involves parents of the targeted students through parent programs at each of the school sites. Further, the Family and Youth Service personnel from each school is trained in the curriculum in addition to the students and parents.

Expected Findings/Results:

In order to reduce the number of sexually active adolescents, a change in attitude among the young people must be made. The prevention and intervention strategies taught will provide these students with the opportunity to make changes in attitude as well as develop healthy attitudes at a young age.

For evaluation purposes, each student is given a Pre-Test or Survey at the start of the project and a Post-Test after the intervention has taken place. Results are correlated to see if there has been any change in the attitude of the adolescents. A follow-up Post-Test is delivered at the beginning of the following school year to see if attitudes have remained the same or changed.

After all of the 6th, 7th and 8th grade students from all Pike County receive the same abstinence message throughout the middle school, it is believed that the lives of these young people will be impacted. Therefore, their lives will be positively affected. There should be less incidence of STDs, fewer school-age pregnancies, and healthier life styles experienced by these youth.

PROJECT SUMMARY - APH 100378

Agency: Northern Michigan Planned Parenthood
1135 E. Eighth Street
Traverse City, MI 49686

Project Director: Martha Lancaster

Phone Number: (616) 347-9692

Evaluator: James Rudolph, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community- and School-Based

Project Start Date: August 1997

Program Description:

The Northern Michigan Planned Parenthood (NMPP) provides reproductive health care and sexuality education programs to 11 counties of northern lower Michigan. The current AFL Demonstration project provides an expansion of NMPP's How to Say No (HTSN) program which uses the Postponing Sexual Involvement curriculum. Through this project, NMPP expanded the program to 6 additional counties using the Managing Pressures Before Marriage curriculum and provided a fifth follow-up session to the program.

Focus of the Demonstration:

The project focuses on teaching decision making skills and to resist peer pressure to 12-14 year old participants in a 15-county area. The program strives to help young people understand the negative consequences of early sexual involvement and increase their ability to avoid them. The project focuses on teaching decision-making skills and to resist peer pressure. Through a series of interactive exercises, the students are encouraged to think for themselves about how society, the media, and peers may pressure them to be sexually active. Role-plays are used to demonstrate and give the students a chance to practice techniques that can help them get out of pressure situations.

HTSN also strengthens the capacity of families to help prevent adolescent sexual behavior and pregnancy. The parents' workshop gives parents the information and skills they need to encourage their young teens to postpone sexual involvement.

Expected Results/Findings:

Because young teens have not yet completed some of the most important phases of their cognitive, psycho-social, and moral growth and development, they are not able to make responsible choices about sexual involvement. Also, they are not able to take full responsibility for any negative outcomes of their actions. Therefore, the project strongly focuses on adolescent boys and girls and their parents to promote abstinence and provide training in skills to resist pressure to be sexually active.

There are 5 main goals of the How To Say No project: (1) to train staff to conduct the How To Say No project, including the newly expanded additional session, (2) to publicize and promote the project throughout the service area, (3) to publicize the new follow-up session of HTSN for schools that are currently involved in the project, (4) to conduct the program sessions to teens and parents, and (5) to reach young teens with effective abstinence information and skills.

The anticipated results and benefits of HTSN are: (1) to help young teens understand the pressures in our society which influence them, (2) to help young teens understand their rights in social relationships, (3) to teach young teens effective techniques for dealing with pressure situations, (4) to help parents understand the pressures which influence young people, and (5) to give parents the tools to help them help their teens say "no."

To measure the performance of the 5 goals, the project utilizes staff reports. In the current HTSN project, a parent and student survey is used to measure the performance of the project goals and objectives. Each participant completes a short questionnaire asking about the effectiveness of the program. In addition to several subjective questions, the survey asks the students to list three assertiveness techniques they were taught. Both students and parents are encouraged to add any comments. The tabulated evaluation results and comments from each school are shared with that school staff. The evaluation reports are also reviewed by the Education Coordinator and the peer educators to provide immediate feedback on their effectiveness as well as information necessary to fine tune the project. This evaluation process will be continued within the newly funded expansion.

PROJECT SUMMARY - APH 100379

Agency: St. Francis Hospital and Health Services
Life's Walk, Inc.
2016 South Main
Maryville, MO 64468

Project Director: Lavona Sill

Phone Number: (816) 562-3552

Evaluator: Kenneth Hill, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community- and School-Based

Project Start Date: August 1997

Program Description:

This community-based coalition has developed a comprehensive 15 day curriculum called Life's Walk Choices. The curriculum reinforces abstinence and the correlation between choices and consequences to the youth of this rural community. The project uses infant simulators, videos and presentations from various community agencies to promote the abstinence message, and role-plays. Students are encouraged to include their parents in the learning experience. The goal of the project is to increase communication between teacher, parent and child to promote healthy lifestyle decisions and abstinence from sexual activity until marriage.

The project reaches all 8th and 10th grade boys and girls in 16 public school districts in 6 counties in northwest Missouri.

Focus of the Demonstration:

The project has three main objectives: (1) to educate teens and preteens to delay sexual activity and parenting, (2) to increase the communication of teens and their parents when talking about sex, teen pregnancy and teen parenting, and (3) to provide current comprehensive curriculum education to area school districts.

The objectives are incorporated into the curriculum by providing the teens with current research based on medically accurate information and with the incorporation of infant simulators. The project strongly enforces abstinence through project scenarios and exercises in the classroom numerous myths and reliability of birth control are discussed along with emotional issues that occur with sexual involvement. The simulators demonstrate the responsibility of parenting and thrust them into a whole new world of responsibility and the reality of teen parenting. The project has numerous activities that show how the student's income potential decreases with teen pregnancy. There is a component on male responsibility and parenting. Also, the project has a component which focuses on legal issues for male and female adolescents as well as exercises focusing on refusal skills and STDs. The curriculum stresses increasing communication between parents and their children through learning activities that the child takes home and discusses with their parents.

Expected Findings/Results:

Through the use of pre- and post-testing, this project should show an increase of parent/child communication in regards to sexuality, teen pregnancy, and teen parenting; an increase the child's knowledge of the consequences of teen parenting and pregnancy; and, a delay in their sexual involvement. Ultimately, the students will practice abstinence and become advocates for abstinence as the only true way to avoid unwanted pregnancy.

PROJECT SUMMARY - APH 100380

Agency: Catholic Community Services
Education and Training
2220 Central
Kansas City, KS 66102

Project Director: Navvab McDaniels

Phone Number: (913) 621-5255 Ext. 134

Evaluator: Christine Rinck, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community- and School-Based

Project Start Date: August 1997

Program Description:

Catholic Community Services (CCS) is a community-based social services agency located in a poor, urban area of Kansas City which provides abstinence education through the community and in schools. The project serves an ethnically diverse population of youth ages 9-19, with a special emphasis on youth ages 9-14. The project uses the Managing Pressures Before Marriage curriculum.

The project involves the public schools, catholic school counselors, and participants in the youth program at CCS. A Project Coordinator/Educator is responsible for working with each staffing component and with CCS to provide the classes and curriculum as well as train the staff members to implement the curriculum themselves. The Project Director has developed a Youth Advisory Board to assist in the implementation and evaluation.

Numerous community agencies help to provide parents with information on human sexuality and the benefits of abstinence, thereby involving the parents in the project.

Focus of the Demonstration:

Through the local health departments, information packets are distributed to parents, counselors, teachers, program directors, and the adolescent participants. These information packets contain information on human sexuality, physiological information and discuss the benefits of abstinence.

In addition to the curriculum information and information packets, a Youth Advisory Board assists in the evaluation and development of the project. A collaboration of community agencies provides comprehensive services and referrals as needed. This collaboration helps to meet the needs of the targeted youth and their families.

Expected Findings/Results:

The evaluation component measures the effectiveness of the project by using appropriate evaluation tools developed for the Managing Pressures Before Marriage curriculum, along with other useful tools developed for abstinence education programs. Surveys are conducted at the beginning, middle and end of the project. Implementation success is measured by (1) the use of focus groups, (2) in-depth interviews, (3) self-administered evaluations following presentations, and (4) direct observation of delivery by evaluation research assistants.

It is hoped that the youth in the project will be positively impacted by the curriculum and information thus preventing teen pregnancy and disease and therefore living a healthier more productive life.

PROJECT SUMMARY - APH 100381

Agency: City of Waynesboro - Office on Youth
Waynesboro Teen Pregnancy Coalition
P.O. Box 894
Waynesboro, VA 22980

Project Director: Brenda Dennison

Phone Number: (540) 942-6757

Evaluator: Pamela Kulbok, RN, DNSc

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community- and School-Based

Project Start Date: August 1997

Program Description:

The Waynesboro Teen Pregnancy Coalition is a new coalition formed specifically to deal with the problem of adolescent pregnancy within the community of Waynesboro, Virginia. The "Creating a New Vision" project saturates the entire community with the abstinence message and provides education programs to local professionals, teachers and parents as well as youth.

Focus of the Demonstration:

The overall goal of the project is to improve physical, mental and social well-being of adolescents through long-term behavior change. Through ambitious community interactions, this project promotes the postponement of initial sexual intercourse as a positive, preferred and healthy decision for teens and pre-teens.

The project targets community professionals, teachers, clergy, and parents and provides them with education on teen sexuality issues in hopes of increasing their knowledge, comfort and confidence levels.

The project involves an extensive media campaign which includes billboards, public service announcements, and speakers to community groups. The project focuses on training and educating adult leaders, teachers and parents on promoting abstinence from sexual activity. Community agency professionals are trained to facilitate abstinence education to middle school students. Parents are trained in parent/child communication skills in their workplace.

This project has four specific educational objectives which are: (1) to examine a direct approach to sexuality education which encourages character development, postponement of sexual activity until marriage, and fidelity in marriage, (2) to clearly articulate an abstinence approach to reducing teen sexual behavior on the basis of medical and social science data, (3) to identify key people and organizations from the community who will communicate and reinforce the project goals, and (4) to examine socio--cultural factors and provide instruction to effectively communicate across cultural differences. All of the project activities will be presented in a way that stresses that abstinence from sexual activity is the best choice for adolescents.

In addition to the extensive media campaign, community professionals are trained to facilitate a 12 session voluntary program at the local high school. These 30-minute lunch time programs are designed to involve the adolescents in previewing their futures based on decisions that are being made in the present. During the sessions, the emphasis is placed on role playing, refusal skills, and making wise choices. Teachers are targeted with a 4 session seminar focusing on character-based education. Because they are often the most difficult to reach, parents will be targeted with an educational program designed to focus on parent/child communication skills.

This project intends to serve large portions of the entire community using pre-adolescent males and females assembled as focal point for the media campaign and other program activities.

Expected Findings/Results:

The project includes a five part evaluation model with the five steps being: (1) relevance, the need for the project, (2) progress, the tracking of program activities, (3) efficiency, the relationship between program outcomes and resources expended, (4) effectiveness, the ability to meet program objectives, and (5) impact, the long-term changes in the client population. Outcomes are measured by tracking changes in attitudes and values, intentions, comfort levels, and confidence in teaching abstinence skills to teens and pre-teens.

PROJECT SUMMARY - APH 100382

Agency: Pima Youth Partnership
347 East Fourth Street
Tucson, AZ 85705

Project Director: Luan E. Wagner, Ph.D.

Phone Number: (520) 882-8294

Evaluator: Julie Reed Erickson, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community-Based

Project Start Date: August 1997

Program Description:

The Pima Youth Partnership provides community development, planning and facilitation to youth and families in the rural areas of Pima County Arizona. The project provides an abstinence only teen pregnancy prevention program to four communities located in southern Pima County.

Focus of the Demonstration:

The Pima Youth Partnership uses several strategies to serve children in grades 4-10 and their parents. There's No Place Like Home newsletters are distributed to families of the participating students. Also, in-home visits with the family units will be made using the Everyone's Not Doing It Video Program. Parents are encouraged to attend PlainTalk resource and information workshops. As for youth participants, Managing Pressures Before Marriage provides 4th - 8th grade students with skill building activities to resist sexual involvement. There are two retreats during the year for middle school young teens where the Managing Pressures Before Marriage curriculum is presented. Prior to each retreat, the parents are invited to a class to help them deal with the pressures faced by their children.

The project strongly focuses on families and adolescents for the purpose of increasing communication, gaining skills and promoting abstinence. The four main objectives are: (1) to increase knowledge of teen sexuality for parents and other community adults by 25%, (2) to increase the knowledge of teen sexuality in 6th -8th grade students by 25%, (3) to increase resistance skills in 6th -8th grade students by 25%, and (4) to increase communication between parents and their children by 10%.

The stated objectives are achieved through multiple components. A coalition representing different segments of the community developed the project, and is instrumental in the implementation process. A slogan campaign and contest is held which encourages communication between youth and parents and other adults about sexuality related issues. A community newsletter increases the community's knowledge about sexuality, and informs of events and activities of the coalition. The newsletter also provides tips for parent/child interactions. The Managing Pressures Before Marriage curriculum is presented in addition to the Plain Talk for Parents program, and the Talking About Sex: A Guide for Families Video Program.

Expected Findings/Results:

The evaluation for this project examines the process and outcomes of interventions aimed at youth and parents. The process evaluation documents from the parents' perspective what occurred during the Talking About Sex: A Guide for Parents component. To examine the parent perspectives, focus groups are conducted by the evaluator. The focus groups are composed a small number of parents of youth in grades 4-5, and explores the barriers and benefits of participating in the project.

The process evaluation examines from the youths' perspective what occurred during the Managing Pressures Before Marriage curriculum. To examine the youth perspectives, a focus group composed of a small number of youth in grades 6-8 is conducted by the evaluator. This focus group explores reactions to the curriculum, knowledge needs, peer pressure and strategies to effectively say "no."

The outcome evaluation documents the youths' changes in knowledge about teen pregnancy, attitudes towards teen sex and intentions to have sex. A short survey has been developed by the evaluator which measures change from before participation in the project to three months after completion of the project.

PROJECT SUMMARY - APH 100383

Agency: Delta Research and Education Foundation
1707 New Hampshire Avenue, NW
Washington, DC 20009

Project Director: Louise E. Taylor, Ph.D.

Phone Number: (202) 238-7552

Evaluator: Peggy G. Carr, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

This social service agency's AFL project will target African-American 9-11 year old boys and girls enrolled in an urban elementary school in the District of Columbia. Using the Sex Can Wait curriculum, the intent is to engender pride and purpose through African Heritage themes. Using these promoting strategies will strengthen the support system that exists within the immediate and extended families. The project shows the relationship to and consequences of early sexual activity. There are opportunities to provide intensive and experiential practices in terms of addressing the importance and benefits of sexual discipline. The students meet in "family" units that are organized around a variety of Afro-centric family rituals through the use of music and dance, as well as story-telling.

Focus of the Demonstration:

The approach of the project is to engender pride and purpose by using a thread and theme of African roots and rituals as well as the strengths and supports that are found in the immediate and extended family. The project shows the relationship to and consequences of premature sexual activity in comparison to the opportunities for social achievement, prosperity and healthy well-being throughout life. The participants learn about and understand the importance as well as the benefits of being sexually discipline and of being a disciplined person, in general.

There are six main objectives. The student will be able to: (1) describe how they feel they will benefit

from practicing abstinence, (2) demonstrate communication, decision-making and conflict management skills, (3) describe the psychological, emotional and physical changes that people experience throughout their life phases, (4) identify and explain the functions of the reproductive anatomy and physiology, (5) articulate the meaning of values , identify values that are important to them, and describe how these values are manifested in their lives, and (6) set long-range goals and the immediate and short steps towards their goals.

Expected Findings/Results:

The primary objective for the evaluation design is to assess the impact of the educational services on the children enrolled in the project. The focus is on the knowledge, skills and abilities gained as a result of the curriculum information as well as the experiential activities used to engage the students. The evaluation design also seeks to assess the impact and effectiveness of the project for the parents of the participants who are actively involved in the information sessions.

The evaluation design uses pre- and post-tests in which students and parents are assessed prior to the intervention and immediately after. The evaluation plan is supplemented with qualitative data collections which include one-on-one interviews and field observations. Data collection includes activity records, logs, planning and implementation documents, interviews with students and parents and field observations.

PROJECT SUMMARY - APH 100384

Agency: The Fair Haven Community Health Center
324 Grand Avenue
New Haven, CT 06513

Project Director: Karen Klein, APRN

Phone Number: (203) 777-7411

Evaluator: Edward Zigler, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community- and School-Based

Project Start Date: August 1997

Program Description:

The Fair Haven Community Health Center is a comprehensive community health center which serves the residents of an inner city neighborhood of New Haven, Connecticut. The project represents a collaboration with the Youth Diversion Program located in the targeted housing development. The project promotes abstinence and self-esteem by expanding the "Brains and Beauty Club" already in place. The "Brains and Beauty Club" is a conduit for transition into middle school for African-American girls ages 11-15 year old who live in a local housing project. Young males ages 11-15 also participate in an after-school program that uses African dance, theater, and culture as a stepping stone into discussions about puberty, decision-making, prevention of STDs and abstinence from sexual activity. Managing Pressures Before Marriage is implemented in the middle school and provides students with skill building activities to resist sexual involvement. The after-school component for both young females and males reinforces the message learned through this curriculum.

Focus of the Demonstration:

The overall goal of the project is to help children and young adolescents make a safe passage through the developmental phases of early and middle adolescence by fostering protective factors that promote abstinence from sexual involvement as well as from alcohol, tobacco, and other drugs.

These protective factors include: physical activity in the form of a dynamic African Dance Class along

with other related youth group activities for young adolescents; creating parental involvement; helping children achieve in non-academic areas that are school-based; educating children to support their peers in decision-making skills; and, providing mentors to younger children. It is believed that families will learn new ways to communicate about appropriate developmental issues of sexuality and growing up.

The project generates creative educational forums such as newsletters, posters, videos, photo collages, and interactive theater in the form of role-plays and skits. These are created with children and families to address their specific questions and concerns. In addition to these forums, the Managing Pressures Before Marriage curriculum is presented to the 5th grade students.

Expected Findings/Results:

For the purposes of evaluation, the project evaluation staff administers pre- and post-test surveys and questionnaires, conduct interviews, monitor attendance, and collect pregnancy test data.

Elementary school faculty works with project staff to develop appropriate materials, lead and participate in discussions with parents and students, and when needed, refer families to counseling and other services.

The student participants create a health education newsletter, become certified as school health educators, and through this process, take on leadership roles in fostering an atmosphere in the school which promotes abstinence and refusal of alcohol, tobacco and other drugs.

The student participants learn communication skills in a peer-mediated forum to refuse unwanted sexual advances, and learn how to cope with peer pressure.

It is the ultimate goal of the project that through creation and expansion of program activities, the project as a whole will become an integral part of the community as children and families learn new ways to think about and communicate about sexuality and growing up.

PROJECT SUMMARY - APH 100385

Agency: County Board of Education
Meade School District 46-1
1230 Douglas Street
Sturgis, SD 57785

Project Director: Josephine Hartman

Phone Number: (605) 347-6544

Evaluator: Dr. Jon C. Marshall

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

Meade School District 46-1, located in a remotely rural western area of South Dakota, provides abstinence education to male and female 7th and 8th grade students in city, rural, and alternative schools. The ethnic make-up of the target population is predominantly Caucasian, with a small portion of Native American and other minority adolescents included.

This project supplements the District's health curriculum by promoting abstinence as the only viable choice for teens and empowering students with refusal skills. By expanding community mentoring projects, the Meade School District hopes to raise the self-esteem necessary for youth to build a future and a career based on healthy life choices.

Focus of the Demonstration:

The overall goal of this abstinence education project is to significantly decrease the incidences of teen pregnancy, STDs, and high risk sexual behavior among youth in Meade School District. The curriculum materials are supplemented by a cultural climate that encourages children and youth to value self-reliance, health, problem-solving capacities, and a commitment to a sound values system.

This project has three objectives for implementation: (1) all students in the target audience

understand adolescent sexual development and human reproduction, (2) all students in the target audience exhibit increased self-esteem, healthy body image, and sound decision-making practices, and (3) all students in the target audience recognize the benefits for teens of abstaining from sexual intercourse and risk behaviors which threaten healthy, long-term goals.

The activities that help achieve project objectives include forming a steering committee, staff training, establishment of community norms, planning a mentoring component through women's organization representatives, using appropriate abstinence education materials in schools, forming opportunities for parent involvement, and using media coverage. In addition to curriculum education, this project utilizes infant simulators.

This project offers a strong bonding opportunity between the female participants and significant adult women in the community. This mentoring component is aimed at strengthening the abstinence from sexual activity message, thereby decreasing the risk of pregnancy and STDs.

Expected Findings/Results:

It is anticipated that the students who are involved in the project will exhibit lower rates of pregnancy, STDs, and high-risk sexual behavior as measured by tests of knowledge and attitude.

Formative and summative measures will be used to assess knowledge, levels of self-esteem, and attitudes toward sexual abstinence. Pre- and post-test assessment will yield data, as will normal statistics gathered by the District for attendance, GPAs, behavior referrals, and nurse referrals. Both numerical and anecdotal data will be used.

PROJECT SUMMARY - APH 100386

Agency: Clay County Boys & Girls Club, Inc.
P.O. Box 894
West Point, MS 39773

Project Director: Mary Kelley

Phone Number: (601) 494-7900

Evaluator: David F. Reid, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: Community-Based

Project Start Date: August 1997

Program Description:

Clay County Boys and Girls Club is a non-profit organization, providing quality recreational, educational and cultural activities after school in a safe nurturing environment to all boys and girls ages 6-18. The Adolescent Family Life project will focus on the issues of teenage pregnancy and how it can affect the life goals of the adolescents and pre-adolescents.

Focus of the Demonstration:

Two adult facilitators infuse the Smart Moves curriculum into the existing after school programs at the Club. The project is promoted through community and school outreach activities.

The target population of this intervention is predominantly African-American 9-15 year old boys and girls. Using the Smart Moves curriculum, this project focuses on the issues and problems of teenage pregnancy by providing accurate, positive information and supportive guidance to enable teens to see other options in their lives, to pursue these goals, and to avoid the pitfalls of early pregnancy and child-rearing. During the project sessions, resistance skills, stress reduction techniques, communication skills, assertiveness training, life planning and accurate adolescent sexuality information will be topics of discussion. The project involves parents by emphasizing on communication skills that are useful when talking to their children about sexuality issues.

Expected Findings/Results:

The three goals of the project are: (1) to increase the participant's knowledge of human sexuality, (2) to increase communication among staff members, parents and guardians and the club members regarding adolescent sexual involvement, and (3) to help teens and pre-teens develop and improve their social and decision-making skills to be able to resist peer pressure and cope with the stresses of growing up.

Through the use of curriculum material, the project will strengthen the resistance skills for younger children. The participants will focus on identifying and resisting peer, social and media pressures to become sexually involved.

PROJECT SUMMARY - APH 100387

Agency: Family Life Educational Foundation
P.O. Box 27094
Philadelphia, PA 19118

Project Director: Kimberly McBryan

Phone Number: (610) 667-2174

Evaluator: Sara K. Bend, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School-Based

Project Start Date: August 1997

Program Description:

The Family Life Educational Foundation (FLEF) is a non-profit, non-denominational organization dedicated to raising awareness to the need to restore and respect family values. This organization is engaged in educational activities, media events, forums, lectures, direct mailings, radio advertisements, billboards and other programs designed to promote public awareness for family values and teen abstinence. The FLEF project is piloting the Choosing the Best curriculum in two middle schools.

Focus of the Demonstration:

The overall goals and objectives of the proposed pilot project are to reduce at-risk sexual behavior among students in three targeted middle schools. The students are able to identify the risks of being sexually active, to evaluate them, and to be aware of the emotional damage as a result of at-risk behavior. They can understand the physical and emotional risks and consequences of unplanned pregnancy, STDs and AIDS. The final objective is that the students are able to make informed decisions in their lives. The Choosing the Best curriculum was chosen because it gives youth the information and training they need to discover for themselves that abstinence until marriage is their "best choice."

Expected Findings/Results:

This project serves adolescents and pre-adolescents in two middle schools in Bucks and Delaware Counties. The classroom sessions are taught by trained abstinence educators with the help of teachers present in the classrooms. Parents are involved through presentations and parent/child activities built into the curriculum.

The evaluation tool has been specifically designed for use with the curriculum. Pre- and post-test surveys are administered to measure intentions and changes in attitude among the participating students. Through data analysis, it is expected that the most at-risk students are those who come from homes where there is only one parent, who perceive parental approval of teen sex, those who smoke, those who drink. These four risk factors demonstrate clear lines between actual behavior and attitudes of the students. As a direct result of this pilot project, it is expected that attitudinal changes will lead to behavioral changes.

PROJECT SUMMARY - APH 100388

Agency: Our Lady of Lourdes Memorial Hospital
Youth Services Department
169 Riverside Drive
Binghamton, NY 13905

Project Director: Bette J. Gifford

Phone Number: (607) 723-2363

Evaluator: Kevin N. Wright, Ph.D.

Type of Project: Abstinence Education Demonstration Project (Pilot)

Model: School- and Community-Based

Project Start Date: August 1997

Program Description:

Our Lady of Lourdes Memorial Hospital is a private non-profit hospital that provides in-patient services and primary and preventive health care in a tri-county region of the southern tier of New York State. The AFL project is designed to strengthen and support families with children ages 9-14 years and prevent unwed adolescent pregnancy by encouraging adolescents to abstain from sexual activity.

Focus of the Demonstration:

The overall goal of the Family Support Program is to strengthen families to ensure the well-being and healthy development of the next generation. Within three local school districts, the project uses an intensive parent training component to improve communication, nurturing and parenting skills in order to reduce the risk factors in their children for premature sexual activity. The students' training consists of skills for improving behavior, and skills for prevention practices. The driving factor for using these strategies is to empower parents by providing information to teach and promote problem-solving skills to both the parents and the students. The project provides an intensive assessment of the family's needs, address those needs, while at the same time, teach the skills that a child will need to remain abstinent from sexual activity.

This strengthening families model integrates the Managing Pressures Before Marriage curriculum with the Families and Schools Together curriculum to improve children's resiliency factors, enhance family functioning, promote abstinence from sexual activity as a family value and build long-term family protective factors.

There are four main objectives. The first objective is to improve family functioning by strengthening parent-child relationships and empowering parents to become primary prevention agents for their children. The second objective is to prevent premature sexual activity and unwed pregnancy by providing human sexuality education that promotes responsible sexual health, abstinence from sexual activity, self-esteem, family relationships, communication techniques, and decision-making skills. The third objective will prevent the child from experiencing school failure by improving the child's behavioral performance, empowering parents as partners in the education process, and increasing family feelings of affiliation with their schools. The last objective is to reduce the everyday stress that parents and children experience by developing ongoing support groups for parents and children, linking participants to needed resources, and building self-esteem of each family member.

The project is comprised of weekly family sessions held for 2-3 hours over an 8 to 12 week period. The first session hour separates parents from children with each separate group lead by a trained team. The parent component consists of behavioral and cognitive strategies to help parents improve their parenting, communication, and nurturing skills and includes a specific component to help parents learn ways to reduce critical risk factors for premature sexual activity, and alcohol/drug use for their children. The children's training component includes life and social skills training to help improve their behavior, competence and commitment to using prevention practices. The remaining session time is a total family involvement experience. This allows the family to practice what they have learned and engage in activities to create a sense of family unity. After graduation from the initial program, parents and youth participate in on-going support groups that maintain the social network that has been established and reinforce skills that have been learned.

Expected Findings/Results:

Reports to an advisory council will document the process of the pilot implementation. Verification of outcome and the measures to be used will be determined by the evaluator and may show: improvement in family functioning, prevention of premature sexual involvement and unwed teen pregnancy, prevention of school failure, and reduction of stress. These outcomes will be measured through pre- and post-tests, parental self-reports, staff observations, attendance records for both school and project activities, and expression of family commitment.

Appendix A

Title XX Legislation

TITLE XX -- ADOLESCENT FAMILY LIFE DEMONSTRATION PROJECTS

§2001. [300z] Findings and purposes

(a) The Congress finds that -

(1) in 1978, an estimated one million one hundred thousand teenagers became pregnant, more than five hundred thousand teenagers carried their babies to term, and over one-half of the babies born to such teenagers were born out of wedlock;

(2) adolescents aged seventeen and younger accounted for more than one-half of the out of wedlock births to teenagers;

(3) in a high proportion of cases, the pregnant adolescent is herself the product of an unmarried parenthood during adolescence and is continuing the pattern in her own lifestyle;

(4) it is estimated that approximately 80 per centum of unmarried teenagers who carry their pregnancies to term live with their families before and during their pregnancy and remain with their families after the birth of the child;

(5) pregnancy and childbirth among unmarried adolescents, particularly young adolescents, often results in severe adverse health, social, and economic consequences including: a higher percentage of pregnancy and childbirth complications; a higher incidence of low birth weight babies; a higher infant mortality and morbidity; a greater likelihood that an adolescent marriage will end in divorce; a decreased likelihood of completing schooling; and higher risks of unemployment and welfare dependency; and therefore, education, training, and job research services are important for adolescent parents;

(6) (A) adoption is a positive option for unmarried pregnant adolescents who are unwilling or unable to care for their children since adoption is a means of providing permanent families for such children from available approved couples who are unable or have difficulty in conceiving or carrying children of their own to term; and

(B) at present, only 4 per centum of unmarried pregnant adolescents who carry their babies to term enter into an adoption plan or arrange for their babies to be cared for by relatives or friends;

(7) an unmarried adolescent who becomes pregnant once is likely to experience recurrent pregnancies and childbearing, with increased risks;

(8) (A) the problems of adolescent premarital sexual relations, pregnancy, and parenthood are multiple and complex and are frequently associated with or are a cause of other troublesome situations in the family; and

(B) such problems are best approached through a variety of integrated and essential services provided to adolescents and their families by other family members, religious and charitable organizations, voluntary associations, and other groups in the private sector as well as services provided by publicly sponsored initiatives;

(9) a wide array of educational, health, and supportive services are not available to adolescents with such problems or to their families, or when available frequently are fragmented and thus are of limited effectiveness in discouraging adolescent premarital sexual relations and the consequences of such relations;

(10)(A) prevention of adolescent sexual activity and adolescent pregnancy depends primarily upon developing strong family values and close family ties, and since the family is the basic social unit in which the values and attitudes of adolescents concerning sexuality and pregnancy are formed, programs designed to deal with issues of sexuality and pregnancy will be successful to the extent that such programs encourage and sustain the role of the family in dealing with adolescent sexual activity and adolescent pregnancy;

(B) Federal policy therefore should encourage the development of appropriate health, educational, and social services where such services are now lacking or inadequate, and the better coordination of existing services where they are available; and

(C) services encouraged by the Federal Government should promote the involvement of parents with their adolescent children, and should emphasize the provision of support by other family members, religious and charitable organizations, voluntary associations, and other groups in the private sector in order to help adolescents and their families deal with complex issues of adolescent premarital sexual relations and the consequences of such relations; and

(11)(A) there has been limited research concerning the societal causes and consequences of adolescent pregnancy;

(B) there is limited knowledge concerning which means of intervention are effective in mediating or eliminating adolescent premarital sexual relations and adolescent pregnancy; and

(C) it is necessary to expand and strengthen such knowledge in order to develop an array of approaches to solving the problems of adolescent premarital sexual relations and adolescent pregnancy in both urban and rural settings.

(b) Therefore, the purposes of this subchapter are -

(1) to find effective means, within the context of the family, of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members, and to promote self discipline and other prudent approaches to the problem of adolescent premarital sexual relations, including adolescent pregnancy;

(2) to promote adoption as an alternative for adolescent parents;

(3) to establish innovative, comprehensive, and integrated approaches to the delivery of care services both for pregnant adolescents, with primary emphasis on unmarried adolescents who are seventeen years of age or under, and for adolescent parents, which shall be based upon an assessment of existing programs and, where appropriate, upon efforts to establish better coordination, integration, and linkages among such existing programs in order to -

(A) enable pregnant adolescents to obtain proper care and assist pregnant adolescents and adolescent parents to become productive independent contributors to family and community life; and

(B) assist families of adolescents to understand and resolve the societal causes which are associated with adolescent pregnancy;

(4) to encourage and support research projects and demonstration projects concerning the societal causes and consequences of adolescent premarital sexual relations, contraceptive use, pregnancy, and child rearing;

(5) to support evaluative research to identify effective services which alleviate, eliminate, or resolve any negative consequences of adolescent premarital sexual relations and adolescent childbearing for the parents, the child, and their families; and

(6) to encourage and provide for the dissemination of results, findings, and information from programs and research projects relating to adolescent premarital sexual relations, pregnancy, and parenthood.

§2002. [300z-1] Definitions; regulations applicable

(a) For the purposes of this subchapter, the term -

(1) "Secretary" means the Secretary of Health and Human Services;

(2) "eligible person" means -

(A) with regard to the provision of care services, a pregnant adolescent, an adolescent parent, or the family of a pregnant adolescent or an adolescent parent; or

(B) with regard to the provision of prevention services and referral to such other services which may be appropriate, a nonpregnant adolescent;

(3) "eligible grant recipient" means a public or nonprofit private organization or agency which demonstrates, to the satisfaction of the Secretary -

(A) in the case of an organization which will provide care services, the capability of providing all core services in a single setting or the capability of creating a network through which all core services would be provided; or

(B) in the case of an organization which will provide prevention services, the capability of providing such services;

(4) "necessary services" means services which may be provided by grantees which are -

(A) pregnancy testing and maternity counseling;

(B) adoption counseling and referral services which present adoption as an option for pregnant adolescents, including referral to licensed adoption agencies in the community if the eligible grant recipient is not a licensed adoption agency;

(C) primary and preventive health services including prenatal and postnatal care;

(D) nutrition information and counseling;

(E) referral for screening and treatment of venereal disease;

(F) referral to appropriate pediatric care;

(G) educational services relating to family life and problems associated with adolescent premarital sexual relations, including -

(i) information about adoption;

(ii) education on the responsibilities of sexuality and parenting;

(iii) the development of material to support the role of parents as the provider of sex education; and

(iv) assistance to parents, schools, youth agencies, and health providers to educate adolescents and preadolescents concerning self-discipline and responsibility in human sexuality;

(H) appropriate educational and vocational services;

(I) referral to licensed residential care or maternity home services; and

(J) mental health services and referral to mental health services and to other appropriate physical health services;

(K) child care sufficient to enable the adolescent parent to continue education or to enter into employment;

(L) consumer education and homemaking;

(M) counseling for the immediate and extended family members of the eligible person;

(N) transportation;

(O) outreach services to families of adolescents to discourage sexual relations among unemancipated minors;

(P) family planning services; and

(Q) such other services consistent with the purposes of this subchapter as the Secretary may approve in accordance with regulations promulgated by the Secretary;

(5) "core services" means those services which shall be provided by a grantee, as determined by the Secretary by regulation;

(6) "supplemental services" means those services which may be provided by a grantee, as determined by the Secretary by regulation;

(7) "care services" means necessary services for the provision of care to pregnant adolescents and adolescent parents and includes all core services with respect to the provision of such care prescribed by the Secretary by regulation;

(8) "prevention services" means necessary services to prevent adolescent sexual relations, including the services described in subparagraphs (A), (D), (E), (G), (H), (M), (N), (O), and (Q) of paragraph (4);

(9) "adolescent" means an individual under the age of nineteen; and

(10) "unemancipated minor" means a minor who is subject to the control, authority, and supervision of his or her parents or guardians, as determined under State law.

(b) Until such time as the Secretary promulgates regulations pursuant to the second sentence of this subsection, the Secretary shall use the regulations promulgated under title VI of the Health Services and Centers Amendments of 1978 (42 U.S.C. 300a-21 et seq.) which were in effect on August 13, 1981, to determine which necessary services are core services for purposes of this subchapter. The Secretary may promulgate regulations to determine which necessary services are core services for purposes of this subchapter based upon an evaluation of and information concerning which necessary services are essential to carry out the purposes of this subchapter and taking into account (1) factors such as whether services are to be provided in urban or rural areas, the ethnic groups to be served, and the nature of the populations to be served, and (2) the results of the evaluations required under section 300z-5(b) of this title. The Secretary may from time to time revise such regulations.

§2003. [300z-2] Demonstration projects; grant authorization, etc.

(a) The Secretary may make grants to further the purposes of this subchapter to eligible grant recipients which have submitted an application which the Secretary finds meets the requirements of section 300z-5 of this title for demonstration projects which the Secretary determines will help communities provide appropriate care and prevention services in easily accessible locations. Demonstration projects shall, as appropriate, provide, supplement, or improve the quality of such services. Demonstration projects shall use such methods as will strengthen the capacity of families to deal with the sexual behavior, pregnancy, or parenthood of adolescents and to make use of support systems such as other family members, friends, religious and charitable organizations, and voluntary associations.

- (b) Grants under this subchapter for demonstration projects may be for the provision of -
 - (1) care services;
 - (2) prevention services; or
 - (3) a combination of care services and prevention services.

§2004. [300z-3] Uses of grants for demonstration projects for services

(a) Covered projects

Except as provided in subsection (b) of this section, funds provided for demonstration projects for services under this subchapter may be used by grantees only to -

- (1) provide to eligible persons -
 - (A) care services;
 - (B) prevention services; or
 - (C) care and prevention services (in the case of a grantee who is providing a combination of care and prevention services);
- (2) coordinate, integrate, and provide linkages among providers of care, prevention, and other services for eligible persons in furtherance of the purposes of this subchapter;
- (3) provide supplemental services where such services are not adequate or not available to eligible persons in the community and which are essential to the care of pregnant adolescents and to the prevention of adolescent premarital sexual relations and adolescent pregnancy;
- (4) plan for the administration and coordination of pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents which will further the objectives of this subchapter; and
- (5) fulfill assurances required for grant approval by section 300z-5 of this title.

(b) Family planning services; availability in community

(1) No funds provided for a demonstration project for services under this subchapter may be used for the provision of family planning services (other than counseling and referral services) to adolescents unless appropriate family planning services are not otherwise available in the community.

(2) Any grantee who receives funds for a demonstration project for services under this subchapter and who, after determining under paragraph (1) that appropriate family planning services are not otherwise available in the community, provides family planning services (other than counseling and referral services) to adolescents may only use funds provided under this subchapter for such family planning services if all funds received by such grantee from all other sources to support such family planning services are insufficient to support such family planning services.

(c) Fees for services: criteria

Grantees who receive funds for a demonstration project for services under this subchapter shall charge fees for services pursuant to a fee schedule approved by the Secretary as a part of the application described in section 300z-5 of this title which bases fees charged by the grantee on the income of the eligible person or the parents or legal guardians of the eligible person and takes into account the difficulty adolescents face in obtaining resources to pay for services. A grantee who receives funds for a demonstration project for services under this subchapter may not, in any case, discriminate with regard to the provision of services to any individual because of that individual's inability to provide payment for such services, except that in determining the ability of an unemancipated minor to provide payment for services, the income of the family of an unemancipated minor shall be considered in determining the ability of such minor to make such payments unless the parents or guardians of the unemancipated minor refuse to make such payments.

§2005. [300z-4] Grants for demonstration projects for services

(a) Priorities - In approving applications for grants for demonstration projects for services under this subchapter, the Secretary shall give priority to applicants who -

- (1) serve an area where there is a high incidence of adolescent pregnancy;
- (2) serve an area with a high proportion of low-income families and where the availability of programs of care for pregnant adolescents and adolescent parents is low;
- (3) show evidence -

(A) in the case of an applicant who will provide care services, of having the ability to bring together a wide range of needed core services and, as appropriate, supplemental services in comprehensive single-site projects, or to establish a well-integrated network of such services (appropriate for the target population and geographic area to be served including the special needs of rural areas) for pregnant adolescents or adolescent parents; or

(B) in the case of an applicant who will provide prevention services, of having the ability to provide prevention services for adolescents and their families which are appropriate for the target population and the geographic area to be served, including the special needs of rural areas;

(4) will utilize to the maximum extent feasible existing available programs and facilities such as neighborhood and primary health care centers, maternity homes which provide or can be equipped to provide services to pregnant adolescents, agencies serving families, youth, and children with established programs of service to pregnant adolescents and vulnerable families, licensed adoption agencies, children and youth centers, maternal and infant health centers, regional rural health facilities, school and other educational programs, mental health programs, nutrition programs, recreation programs, and other ongoing pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents;

(5) make use, to the maximum extent feasible, of other Federal, State, and local funds, programs, contributions, and other third-party reimbursements;

(6) can demonstrate a community commitment to the program by making available to the demonstration project non-Federal funds, personnel, and facilities;

(7) have involved the community to be served, including public and private agencies, adolescents, and families, in the planning and implementation of the demonstration project; and

(8) will demonstrate innovative and effective approaches in addressing the problems of adolescent premarital sexual relations, pregnancy, or parenthood, including approaches to provide pregnant adolescents with adequate information about adoption.

(b) Factors to be considered in making grants; special needs of rural areas

(1) The amount of a grant for a demonstration project for services under this subchapter shall be determined by the Secretary, based on factors such as the incidence of adolescent pregnancy in the geographic area to be served, and the adequacy of pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents in such area.

(2) In making grants for demonstration projects for services under this subchapter, the Secretary shall consider the special needs of rural areas and, to the maximum extent practicable, shall distribute funds taking into consideration the relative number of adolescents in such areas in need of such services.

(c) Duration; Federal share

(1) A grantee may not receive funds for a demonstration project for services under this subchapter for a period in excess of 5 years.

(2) (A) Subject to paragraph (3), a grant for a demonstration project for services under this

subchapter may not exceed -

- (i) 70 per centum of the costs of the project for the first and second years of the project;
- (ii) 60 per centum of such costs for the third year of the project;
- (iii) 50 per centum of such costs for the fourth year of the project; and
- (iv) 40 per centum of such costs for the fifth year of the project.

(B) Non-Federal contributions required by subparagraph (A) may be in cash or in kind, fairly evaluated, including plant, equipment, or services.

(3) The Secretary may waive the limitation specified in paragraph (2)(A) for any year in accordance with criteria established by regulation.

§2006. [300z-5] Requirements for applications

(a) Form, content, and assurances

An application for a grant for a demonstration project for services under this subchapter shall be in such form and contain such information as the Secretary may require, and shall include -

- (1) an identification of the incidence of adolescent pregnancy and related problems;
- (2) a description of the economic conditions and income levels in the geographic area to be served;
- (3) a description of existing pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents (including adoption services), and including where, how, by whom, and to which population groups such services are provided, and the extent to which they are coordinated in the geographic area to be served;
- (4) a description of the major unmet needs for services for adolescents at risk of initial or recurrent pregnancies and an estimate of the number of adolescents not being served in the area;
- (5) (A) in the case of an applicant who will provide care services, a description of how all core services will be provided in the demonstration project using funds under this subchapter or will otherwise be provided by the grantee in the area to be served, the population to which such services will be provided, how such services will be coordinated, integrated, and linked with other related programs and services and the source or sources of funding of such core services in the public and private sectors; or
(B) in the case of an applicant who will provide prevention services, a description of the necessary services to be provided and how the applicant will provide such services;
- (6) a description of the manner in which adolescents needing services other than the services provided directly by the applicant will be identified and how access and appropriate referral to such other services (such as Medicaid; licensed adoption agencies; maternity home services; public assistance; employment services; child care services for adolescent parents; and other city, county, and State programs related to adolescent pregnancy) will be provided, including a description of a plan to coordinate such other services with the services supported under this subchapter;
- (7) a description of the applicant's capacity to continue services as Federal funds decrease and in the absence of Federal assistance;
- (8) a description of the results expected from the provision of services, and the procedures to be used for evaluating those results;
- (9) a summary of the views of public agencies, providers of services, and the general public in the geographic area to be served, concerning the proposed use of funds provided for a demonstration project for services under this subchapter and a description of procedures used to obtain those views, and, in the case of applicants who propose to coordinate services administered by a State, the written comments of the appropriate State officials responsible for such services;
- (10) assurances that the applicant will have an ongoing quality assurance program;

(11) assurances that, where appropriate, the applicant shall have a system for maintaining the confidentiality of patient records in accordance with regulations promulgated by the Secretary;

(12) assurances that the applicant will demonstrate its financial responsibility by the use of such accounting procedures and other requirements as may be prescribed by the Secretary;

(13) assurances that the applicant (A) has or will have a contractual or other arrangement with the agency of the State (in which the applicant provides services) that administers or supervises the administration of a State plan approved under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) for the payment of all or a part of the applicant's costs in providing health services to persons who are eligible for medical assistance under such a State plan, or (B) has made or will make every reasonable effort to enter into such an arrangement;

(14) assurances that the applicant has made or will make and will continue to make every reasonable effort to collect appropriate reimbursement for its costs in providing health services to persons who are entitled to benefits under title V of the Social Security Act (42 U.S.C. 701 et seq.), to medical assistance under a State plan approved under title XIX of such Act (42 U.S.C. 1396 et seq.), or to assistance for medical expenses under any other public assistance program or private health insurance program;

(15) assurances that the applicant has or will make and will continue to make every reasonable effort to collect appropriate reimbursement for its costs in providing services to persons entitled to services under parts B and E of title IV (42 U.S.C. 620 et seq., 670 et seq.) and title XX of the Social Security Act (42 U.S.C. 1397 et seq.);

(16) (A) a description of -

(i) the schedule of fees to be used in the provision of services, which shall comply with section 300z-3(c) of this title and which shall be designed to cover all reasonable direct and indirect costs incurred by the applicant in providing services; and

(ii) a corresponding schedule of discounts to be applied to the payment of such fees, which shall comply with section 300z-3(c) of this title and which shall be adjusted on the basis of the ability of the eligible person to pay;

(B) assurances that the applicant has made and will continue to make every reasonable effort -

(i) to secure from eligible persons payment for services in accordance with such schedules;

(ii) to collect reimbursement for health or other services provided to persons who are entitled to have payment made on their behalf for such services under any Federal or other government program or private insurance program; and

(iii) to seek such reimbursement on the basis of the full amount of fees for services without application of any discount; and

(C) assurances that the applicant has submitted or will submit to the Secretary such reports as the Secretary may require to determine compliance with this paragraph;

(17) assurances that the applicant will make maximum use of funds available under subchapter VIII of this chapter;

(18) assurances that the acceptance by any individual of family planning services or family planning information (including educational materials) provided through financial assistance under this subchapter shall be voluntary and shall not be a prerequisite to eligibility for or receipt of any other service furnished by the applicant;

(19) assurances that fees collected by the applicant for services rendered in accordance with this subchapter shall be used by the applicant to further the purposes of this subchapter;

(20) assurances that the applicant, if providing both prevention and care services will not exclude or discriminate against any adolescent who receives prevention services and subsequently

requires care services as a pregnant adolescent;

(21) a description of how the applicant will, as appropriate in the provision of services -

(A) involve families of adolescents in a manner which will maximize the role of the family in the solution of problems relating to the parenthood or pregnancy of the adolescent;

(B) involve religious and charitable organizations, voluntary associations, and other groups in the private sector as well as services provided by publicly sponsored initiatives;

(22) (A) assurances that -

(i) except as provided in subparagraph (B) and subject to clause (ii), the applicant will notify the parents or guardians of any unemancipated minor requesting services from the applicant and, except as provided in subparagraph (C), will obtain the permission of such parents or guardians with respect to the provision of such services; and

(ii) in the case of a pregnant unemancipated minor requesting services from the applicant, the applicant will notify the parents or guardians of such minor under clause (i) within a reasonable period of time;

(B) assurances that the applicant will not notify or request the permission of the parents or guardian of any unemancipated minor without the consent of the minor -

(i) who solely is requesting from the applicant pregnancy testing or testing or treatment for venereal disease;

(ii) who is the victim of incest involving a parent; or

(iii) if an adult sibling of the minor or an adult aunt, uncle, or grandparent who is related to the minor by blood certifies to the grantee that notification of the parents or guardians of such minor would result in physical injury to such minor; and

(C) assurances that the applicant will not require, with respect to the provision of services, the permission of the parents or guardians of any pregnant unemancipated minor if such parents or guardians are attempting to compel such minor to have an abortion;

(23) assurances that primary emphasis for services supported under this subchapter shall be given to adolescents seventeen and under who are not able to obtain needed assistance through other means;

(24) assurances that funds received under this subchapter shall supplement and not supplant funds received from any other Federal, State, or local program or any private sources of funds; and

(25) a plan for the conduct of, and assurances that the applicant will conduct, evaluations of the effectiveness of the services supported under this subchapter in accordance with subsection (b) of this section.

(b) Evaluations: amount, conduct, and technical assistance

(1) Each grantee which receives funds for a demonstration project for services under this subchapter shall expend at least 1 per centum but not in excess of 5 per centum of the amounts received under this subchapter for the conduct of evaluations of the services supported under this subchapter. The Secretary may, for a particular grantee upon good cause shown, waive the provisions of the preceding sentence with respect to the amounts to be expended on evaluations, but may not waive the requirement that such evaluations be conducted.

(2) Evaluations required by paragraph (1) shall be conducted by an organization or entity which is independent of the grantee providing services supported under this subchapter. To assist in conducting the evaluations required by paragraph (1), each grantee shall develop a working relationship with a college or university located in the grantee's State which will provide or assist in providing monitoring and evaluation of services supported under this subchapter unless no college or university in the grantee's State is willing or has the capacity to provide or assist in providing such monitoring and assistance.

(3) The Secretary may provide technical assistance with respect to the conduct of evaluations required under this subsection to any grantee which is unable to develop a working relationship with a college or university in the applicant's State for the reasons described in paragraph (2).

(c) Reports

Each grantee which receives funds for a demonstration project for services under this subchapter shall make such reports concerning its use of Federal funds as the Secretary may require. Reports shall include, at such times as are considered appropriate by the Secretary, the results of the evaluations of the services supported under this subchapter.

(d) Notification of parents; "adult" defined

(1) A grantee shall periodically notify the Secretary of the exact number of instances in which a grantee does not notify the parents or guardians of a pregnant unemancipated minor under subsection (a)(22)(B)(iii) of this section.

(2) For purposes of subsection (a)(22)(B)(iii) of this section, the term "adult" means an adult as defined by State law.

(e) Submission of applications to Governor; comments by Governor

Each applicant shall provide the Governor of the State in which the applicant is located a copy of each application submitted to the Secretary for a grant for a demonstration project for services under this subchapter. The Governor shall submit to the applicant comments on any such application within the period of sixty days beginning on the day when the Governor receives such copy. The applicant shall include the comments of the Governor with such application.

(f) Availability of core services

No application submitted for a grant for a demonstration project for care services under this subchapter may be approved unless the Secretary is satisfied that core services shall be available through the applicant within a reasonable time after such grant is received.

§2007. [300z-6] Coordination of programs

(a) The Secretary shall coordinate Federal policies and programs providing services relating to the prevention of adolescent sexual relations and initial and recurrent adolescent pregnancies and providing care services for pregnant adolescents. In achieving such coordination, the Secretary shall

(1) require grantees who receive funds for demonstration projects for services under this subchapter to report periodically to the Secretary concerning Federal, State, and local policies and programs that interfere with the delivery of and coordination of pregnancy prevention services and other programs of care for pregnant adolescents and adolescent parents;

(2) provide technical assistance to facilitate coordination by State and local recipients of Federal assistance;

(3) review all programs administered by the Department of Health and Human Services which provide prevention services or care services to determine if the policies of such programs are consistent with the policies of this subchapter, consult with other departments and agencies of the Federal Government who administer programs that provide such services, and encourage such other departments and agencies to make recommendations, as appropriate, for legislation to modify such programs in order to facilitate the use of all Government programs which provide such services as a basis for delivery of more comprehensive prevention services and more comprehensive programs of care for pregnant adolescents and adolescent parents;

(4) give priority in the provision of funds, where appropriate, to applicants using single or coordinated grant applications for multiple programs; and

(5) give priority, where appropriate, to the provision of funds under Federal programs administered by the Secretary (other than the program established by this subchapter) to projects providing comprehensive prevention services and comprehensive programs of care for pregnant adolescents and adolescent parents.

(b) Any recipient of a grant for a demonstration project for services under this subchapter shall coordinate its activities with any other recipient of such a grant which is located in the same locality.

§2008. [300z-7] Research

(a) Grants and contracts; duration; renewal; amount

(1) The Secretary may make grants and enter into contracts with public agencies or private organizations or institutions of higher education to support the research and dissemination activities described in paragraphs (4), (5), and (6) of section 300z(b) of this title.

(2) The Secretary may make grants or enter into contracts under this section for a period of one year. A grant or contract under this section for a project may be renewed for four additional one-year periods, which need not be consecutive.

(3) A grant or contract for any one-year period under this section may not exceed \$100,000 for the direct costs of conducting research or dissemination activities under this section and may include such additional amounts for the indirect costs of conducting such activities as the Secretary determines appropriate. The Secretary may waive the preceding sentence with respect to a specific project if he determines that -

(A) exceptional circumstances warrant such waiver and that the project will have national impact; or

(B) additional amounts are necessary for the direct costs of conducting limited demonstration projects for the provision of necessary services in order to provide data for research carried out under this subchapter.

(4) The amount of any grant or contract made under this section may remain available for obligation or expenditure after the close of the one-year period for which such grant or contract is made in order to assist the recipient in preparing the report required by subsection (f)(1) of this section.

(b) Scope of permissible activities

(1) Funds provided for research under this section may be used for descriptive or explanatory surveys, longitudinal studies, or limited demonstration projects for services that are for the purpose of increasing knowledge and understanding of the matters described in paragraphs (4) and (5) of section 300z(b) of this title.

(2) Funds provided under this section may not be used for the purchase or improvement of land, or the purchase, construction, or permanent improvement (other than minor remodeling) of any building or facility.

(c) Applications

The Secretary may not make any grant or enter into any contract to support research or dissemination activities under this section unless -

(1) the Secretary has received an application for such grant or contract which is in such form and which contains such information as the Secretary may by regulation require;

(2) the applicant has demonstrated that the applicant is capable of conducting one or more of the types of research or dissemination activities described in paragraph (4), (5), or (6) of section 300z(b) of this title; and

(3) in the case of an application for a research project, the panel established by subsection (e)(2) of this section has determined that the project is of scientific merit.

(d) Coordination with National Institutes of Health

The Secretary shall, where appropriate, coordinate research and dissemination activities carried out under this section with research and dissemination activities carried out by the National Institutes of Health.

(e) Review of applications for grants and contracts; establishment of review panel

(1) The Secretary shall establish a system for the review of applications for grants and contracts under this section. Such system shall be substantially similar to the system for scientific peer review of the National Institutes of Health and shall meet the requirements of paragraphs (2) and (3).

(2) In establishing the system required by paragraph (1), the Secretary shall establish a panel to review applications under this section. Not more than 25 per centum of the members of the panel shall be physicians. The panel shall meet as often as may be necessary to facilitate the expeditious review of applications under this section, but not less than once each year. The panel shall review

each project for which an application is made under this section, evaluate the scientific merit of the project, determine whether the project is of scientific merit, and make recommendations to the Secretary concerning whether the application for the project should be approved.

(3) The Secretary shall make grants under this section from among the projects which the panel established by paragraph (2) has determined to be of scientific merit and may only approve an application for a project if the panel has made such determination with respect to such a project. The Secretary shall make a determination with respect to an application within one month after receiving the determinations and recommendations of such panel with respect to the application.

(f) Reports

(1) (A) The recipient of a grant or contract for a research project under this section shall prepare and transmit to the Secretary a report describing the results and conclusions of such research. Except as provided in subparagraph (B), such report shall be transmitted to the Secretary not later than eighteen months after the end of the year for which funds are provided under this section. The recipient may utilize reprints of articles published or accepted for publication in professional journals to supplement or replace such report if the research contained in such articles was supported under this section during the year for which the report is required.

(B) In the case of any research project for which assistance is provided under this section for two or more consecutive one-year periods, the recipient of such assistance shall prepare and transmit the report required by subparagraph (A) to the Secretary not later than twelve months after the end of each one-year period for which such funding is provided.

(2) Recipients of grants and contracts for dissemination under this section shall submit to the Secretary such reports as the Secretary determines appropriate.

§2009. [300z-8] Evaluation and administration

(a) Of the funds appropriated under this subchapter, the Secretary shall reserve not less than 1 per centum and not more than 3 per centum for the evaluation of activities carried out under this subchapter. The Secretary shall submit to the appropriate committees of the Congress a summary of each evaluation conducted under this section.

(b) The officer or employee of the Department of Health and Human Services designated by the Secretary to carry out the provisions of this subchapter shall report directly to the Assistant Secretary for Health with respect to the activities of such officer or employee in carrying out such provisions.

§ 2010. [300z-9] Authorization of appropriations

(a) For the purpose of carrying out this subchapter, there are authorized to be appropriated \$30,000,000 for the fiscal year ending September 30, 1982, \$30,000,000 for the fiscal year ending September 30, 1983, \$30,000,000 for the fiscal year ending September 30, 1984, and \$30,000,000 for the fiscal year ending September 30, 1985.

(b) At least two-thirds of the amounts appropriated to carry out this subchapter shall be used to make grants for demonstration projects for services.

(c) Not more than one-third of the amounts specified under subsection (b) of this section for use for grants for demonstration projects for services shall be used for grants for demonstration projects for prevention services.

§2011. [300z-10] Restrictions

(a) Grants or payments may be made only to programs or projects which do not provide abortions or abortion counseling or referral, or which do not subcontract with or make any payment to any person who provides abortions or abortion counseling or referral, except that any such program or project may provide referral for abortion counseling to a pregnant adolescent if such adolescent and the parents or guardians of such adolescent request such referral; and grants may be made only to projects or programs which do not advocate, promote, or encourage abortion.

(b) The Secretary shall ascertain whether programs or projects comply with subsection (a) of this section and take appropriate action if programs or projects do not comply with such subsection, including withholding of funds.

Appendix B

Welfare Reform Legislation

Welfare Reform Legislation

The grantee shall provide an "abstinence education" program which is consistent with section 510(b)(2) of Title V of the Social Security Act (42 U.S.C. § 701 et seq), as amended by section 912 of the "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub. L. No. 104-193.

ABSTINENCE EDUCATION AS DEFINED IN THE "PERSONAL RESPONSIBILITY AND WORK OPPORTUNITY ACT OF 1996", P.L. 104-193

As defined by this legislation, the term "abstinence education" means an educational or motivational program which-

- A. Has as its exclusive purpose teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
- B. Teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
- C. Teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
- D. Teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;
- E. Teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
- F. Teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents and society;
- G. Teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
- H. Teaches the importance of attaining self-sufficiency before engaging in sexual activity.